






**TEXAS A&M UNIVERSITY-CORPUS CHRISTI
VOUCHER CREATE FORM INSTRUCTION**


VENDOR NAME: _____ 1  VENDOR/SS#: _____ 2 


REMIT ADDRESS: _____ 3  ALT VENDOR NAME _____ 4 

CITY, STATE, & ZIP: _____ 3  ALT VENDOR # _____ 4 

INV. DATE: _____ 5  ORDER DATE: _____ 6  DELIVERY DATE: _____ 7 

8  (circle one) SEND SUPPORT: YES/ NO **IF YES, PLEASE SUPPLY COPIES TO MAIL W/CHECK**









DESCRIPTION: _____ 9 

COMMENTS: _____ 10 

Non-Compliance ATF FORM _____


11 

FOR ACCOUNTS PAYABLE USE ONLY: (STATE ACCOUNTS) USAS DOC TYPE _____ LDT CODE: _____

	ACCOUNT #	OBJ C	P.O. #	P/F/N	BANK NO.	AMOUNT
*LINE #1:	12 	13  13-A 	14 	15 	16 	17 
INVOICE # :	18 					
*LINE #2:						
INVOICE # :						
*LINE #3:						
INVOICE # :						
*LINE #4:						
INVOICE # :						
*LINE #5:						
INVOICE # :						
						TOTAL: _____

PREPARED BY: _____ 19  DEPARTMENT USE UNIT # _____ DATE: _____ EXT.# : _____

APPROVED BY: _____ 20  (RESPONSIBLE PARTY ON ACCOUNT) DATE: _____

21  I CERTIFY THAT THE EXPENSE SHOWN ABOVE IS TRUE, CORRECT AND UNPAID: _____ DATE: _____

ACCOUNTS PAYABLE DATE STAMP 	FOR ACCOUNTS PAYABLE USE ONLY Comments: _____ _____ _____
-------------------------------------	--

AUDITED BY: _____ DATE: _____

APPROVAL: _____ DATE: _____