



University of New Brunswick

UNBF BOOKSTORE VOUCHER

Date	
Item(s) requested	
Estimated cost	
Requester (Please print)	
Requester Signature	

Proxy (if applicable)

I _____ (please print) permit _____ (please print) to purchase the above item(s) identified above on my behalf and will accept the charge against my department/faculty's budget.

RESTRICTED CATEGORIES (Giftware, Clothing, Gift Certificates)

For whom is the item being purchased? Please Check One of the following:

☐ Employee (name required) ☐ Student & Employee of UNB ☐ Student ☐ Non Employee

Employee Name: _____

Purpose of Item requested

ALL VOUCHERS FOR RESTRICTED CATEGORIES MUST BE SIGNED BELOW AS INDICATED

Preapproval for purchase	Print Name	Director's +/-VPAC/Dean/AVP/VP/Pres	
	Signature	Director's +/-VPAC/Dean/AVP/VP/Pres	Date