

AUBURN UNIVERSITY
MULTIPLE VENDOR VOUCHER

PAYEE		SEQ	VENDOR NUMBER	Fund	Org	Acct	Prog	Actvty	Locatn	AMOUNT
NAME	ADDRESS									
BUSINESS OFFICE USE ONLY						TOTAL AMOUNT CLAIMED:				
						PREPARED BY _____ DATE _____				
						APPROVED BY DEPARTMENT HEAD _____ APPROVED BY DEAN _____				
						APPROVED BY PROCUREMENT & PAYMENT SERVICES _____				