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American Job Center
network



Rivers East
WORKFORCE DEVELOPMENT BOARD



Purchase Authorization Voucher

Participant Name: _____ State ID: _____

County: Beaufort Bertie Hertford Martin Pitt

Program: ISY Youth OSY Youth Adult DW

Approved Training: _____ Fund Code: _____

Vendor Name: _____ Date Issued: _____

Approved Items <i>only those checked</i>			
<input type="checkbox"/> 2 uniform tops	\$	<input type="checkbox"/> 1 pen light	\$
<input type="checkbox"/> 2 uniform pants	\$	<input type="checkbox"/> 1 pair of scissors	\$
<input type="checkbox"/> 1 lab coat	\$	<input type="checkbox"/> 1 blood pressure cuff	\$
<input type="checkbox"/> embroidery	\$	<input type="checkbox"/> Other:	\$
<input type="checkbox"/> 1 pair of shoes	\$	<input type="checkbox"/> Other:	\$
<input type="checkbox"/> 1 watch	\$	<input type="checkbox"/> Other:	\$

Total Amount Approved: \$ _____ Written Amount: _____

This Voucher Certificate is approved and issued by: _____
Staff Printed Name

Staff Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Redemption of Voucher

Voucher may not exceed dollar amount above, or items checked. Vouchers expire 30 days from the issue date. All vouchers must be submitted for payment within 45 days. **An itemized invoice must be attached to the redeemed voucher.**

Vendor Signature: _____ Date: _____

Return redeemed voucher and an itemized invoice to: _____ County NCWorks Career Center

ATTN: _____ Address: _____