

Multi-Payee Voucher Cover Sheet

FAMIS Voucher #											
Traveler: Payee id, name, and address of traveler.						Alternate: Vendor to whom check will be made payable. Leave blank if check should be made payable to vendor listed above.					
TINS						Alt TINS					
Name & Address						Name & Address					
Title						Title					
Account	Invoice Date	Order Date	Invoice Rec'd Date	Delivery Date	Requested Pymt Date	IC	RSN	Obj Code	Bank	Amount	Vendor Invoice #
Total										\$	-
Designated Headquarters:					Purpose:						
Travel Dates:											
Destination:											
Total: \$ -											

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Designated Headquarters:					Purpose:						
Travel Dates:											
Destination:											
Total: \$ -											

Grand Total (Should Match Document Amount from Voucher): \$ -