

ProCard Attestation

Cardholder Information

Name _____ Last 6 Digits of Card Number _____
Billing Cycle Dates _____ to _____ Total Amount of UT Share Reconcile Statement \$ _____

Certification

- Each person signing below certifies that the expenses are just, true and correct, and were incurred by the cardholder for University business on dates shown on supporting documentation.
- Certification is also made that charges were not for personal use or are considered as an unallowable purchase according to the University's ProCard Procedure.
- We further understand that improper use of this card may result in disciplinary action, up to and including termination of employment.

Cardholder Signature _____

Date _____

Reconciler Signature _____
(if different from the cardholder)

Date _____

Reviewer Signature _____
(Supervisor/Manager)

Date _____

Documents to Attach to the ProCard Statement in UT Share

- Itemized document for each item purchased, returned or credited
- [Warrant Hold check](#) is required only if purchase is over \$500 and the vendor is located in the State of Texas. A screen-print documenting the search was completed no earlier than 7 days prior to purchase.
- [Form BF-PGS-F6, Asset Information](#) (if needed)
- [Form BF-PGC-F3, Gift Certificate Expense](#) (if needed)
- [Form BF-PGC-F4, Official Occasion Expense](#) (if needed)
- [Approved Business Affairs Exception Request](#) (if needed)