

Operational Services

Exhibit - Cardholder's Statement Affirming Familiarity with Requirements for Using District Credit and/or Procurement Cards

Cardholder's Name

Cardholder's Address

Cardholder's Position

Name of individual who authorized issuance of card.

I affirm that I am familiar with the Board's policy on using credit and procurement cards, that I understand my responsibilities regarding use of such cards, and that I agree to adhere to all requirements regarding such cards.

Cardholder's Signature

Date

.....
I provided a copy of this Statement along with a copy of Board policy 4:55, *Use of Credit and Procurement Cards*, to the cardholder who signed this statement.

Office Personnel Signature

Date

DATED: April 2014
REVIEWED: September 21, 2023
REVISED: