CENTRAL OHIO TECHNICAL COLLEGE PROCUREMENT CARD RECONCILIATION FORM

Vendor Name: Describe Items & Purpose of Purchase/Event:				Date:
	_			
Attach original ITEMIZE		Budget Information		
and signed credit card			Fund-Location	-
receipts for all purchases.			Cost Shared	
			Department	
			Object	
Authorized Purchaser	Date		AL CHARGES \$	
Unit Budget Manager	Date	Se	nior Administrator	Date

General Instructions and Policy

- 1. Complete all sections of the form.
- 2. Attach original itemized and signed receipts to form.
- 3. The "Unit Budget Manager" and "Authorized Purchaser" (if different than the UBM) must sign the form for all charges. Senior Administrator signature only required if appropriate.

Unauthorized purchases, i.e., alcohol, non-university related purchases are the responsibility of the Unit Budget Manager. The campus reserves the right to withhold the total charged from the Unit Budget Managers next available paycheck if card is misused or form is incomplete.