

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 the 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