

**University of Wisconsin - Parkside  
VISA Procard Program  
APPLICATION**

Cardholder Name: \_\_\_\_\_

Department Name: \_\_\_\_\_

Building/Room #: \_\_\_\_\_

Office Phone #: \_\_\_\_\_

Single Transaction Limit: \_\_\_\_\_

(MAXIMUM \$5,000.00)

Cycle Limit: \_\_\_\_\_

Accounting Code: \_\_\_\_\_

(Fund, Unit, Dept, Program) {Grant/Project}

**REVIEW AGREEMENT**

In authorizing this application for a Purchasing Card, I understand that I, or an employee I designate, will regularly review and approve the cardholder's transaction and maintenance of an official University record by performing the following:

- A. Reviewing receipts and statement to confirm accuracy of cardholder's log entries.
- B. Verifying purchases are for University business and to the best of the reviewer's knowledge comply with applicable rules and regulations.
- C. Affirming travel related charges have necessary approvals, are consistent with corresponding employee reimbursements precluding any double billing, and that a Procurement Card Travel Log has been submitted to Pre-Audit.
- D. Reporting any personal or unauthorized charges upon discovery to the Business Office for remediation.
- E. Checking for cardholder's signature and indicating review and approval by signing the Procurement Card Logs.

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean/Director Signature

\_\_\_\_\_  
Date