PCard Holder Responsibilities

1. Make purchase
2. Complete PCard Purchase Form
   a. **Cardholder**: Your Name
   b. **Purchase Date** – the date of the purchase
   c. **Program Info** – Describe/name the program that is going to benefit from this purchase
   d. **Vendor Name**: The name of the business purchased from
   e. **Business Purpose** - provides justification for WHY the expenditure was incurred, how it benefitted the UA and how it complied with all laws and regulations.
   e. Food purchases related to meetings and conferences, when the primary purpose is the dissemination of technical information or conducting business.
      i. **Agenda/program**: Attach when available.
      ii. **Attendees**: If less than 20 attendees please include a list of participants broken out by Employees and non-Employee participants.
      iii. **Detailed Receipt**: List of food items purchased along with the total cost of the purchase
PCard Holder Responsibilities

**PCARD USE FORM**
Submit along with detailed receipt

<table>
<thead>
<tr>
<th>Card Holder:</th>
<th>Purchase Date:</th>
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<tbody>
<tr>
<td>Program Info:</td>
<td>Vendor Name:</td>
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</table>

*Business Purpose* provides justification for WHY the expenditure was incurred, how it benefitted the UA and how it complied with all laws and regulations. *(No less than 10 words)*

Who benefits: _____________________________

What was purchased: _____________________________

Why purchased: _____________________________

*If the transaction is FOOD purchased for a meeting or conference, please attach:*

- [ ] Agenda
- [ ] List of Attendees (indicate employed by U of A or not)
- [ ] Itemized Receipt

*For a large group of 20 or more*

UofA Affiliation _____________________________

Number of people in attendance: ________

3. Only one receipt per form is to be attached.

This form can be found at:

Yavapai - [http://uacals.org/3av](http://uacals.org/3av)
Coconino - [http://uacals.org/3aa](http://uacals.org/3aa)
Mohave - [http://uacals.org/3ax](http://uacals.org/3ax)

4. Enter purchase on PCard Receipt Log
   - [ ] Date
   - [ ] Your Initials
   - [ ] Vendor

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PCard Holder Responsibilities

i. **Amount**

<table>
<thead>
<tr>
<th>DATE</th>
<th>FROM (PURCHASE)</th>
<th>VENDOR</th>
<th>AMOUNT</th>
<th>RECD BY INITIALS</th>
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5. Please submit receipt and Purchase Card form to support staff no later than the 2nd business day after purchase.