



TEXAS SOUTHERN UNIVERSITY

PAYMENT CARD REVIEW FORM

No violation(s) cited

Reporting Cycle: _____

Name of Card holder: _____ Last 6 Digits of Card #: _____

Any noncompliant item listed below must be **identified** by the C/DBA prior to forwarding this form along with the expense report / supporting documentation to Procurement Services..

Expense Report not signed by both the card holder and immediate supervisor.

Incorrect account number used _____

Insufficient funds to pay for the charges

Taxes included for State of Texas vendor purchases

Vague or misleading expense descriptions

No vendor Hold documentation for purchases exceeding \$500 on P-Card

Support documentation missing. List the document, the vendor and amount:

Documentation is submitted past the deadline

Personal purchases by error (Reimbursement to the university is required when forwarding documentation.)

Prohibited purchase: List the prohibited purchase here and name the vendor: _____

Split purchase (back to back purchases to the same vendor to exceed single transaction limit)

Gratuity exceeding 20% on local funds. No gratuity is allowed when using state funds

Receipt(s) not itemized

Use of non-contracted vendor (List the vendor) _____

Prohibited grant purchase (Review provided by Research Financial Services) _____

Travel meals when the trip is not an overnight stay

First class or business class airfare

Purchase that is considered extravagant

Someone other than the cardholder's expenses charged

Rubber stamp signature used

PayPal or Square transaction was processed

Unauthorized entertainment expense

Travel purchases on a P-Card / P-Card purchases on travel card.

Charges other than airfare on a travel card when state funds are utilized.

Miscellaneous _____

The attached expense report / supporting documentation have been reviewed and to the best of my knowledge, the item(s) cited above are / are not violation(s) of the Payment Card Program according to TSU policy, procedures and guidelines.

Name of College/Division Business Administrator

Signature

Date