Department of Health and Mental Hygiene - Cardholder Activity Log

Cardholder Name: _____ Period Covered: Beginning _____/26/_____ Ending _____/25/_____

ORDER DATE	SUPPLIER / CONTACT/ PHONE#	Enter PO / BPO# (where applicable)	DESCRIPTION	COST / REFUND	DELIVERY COSTS	SALES TAX	TOTAL TRANS-ACTION AMOUNT	DELIVERY DATE	PCA	AOBJ	RECON TO BANK STMT?

The Activity Log is the key to managing and controlling the Purchasing Card Program. Gift cards and other cash-like purchases are forbidden, and all equipment purchases must be recorded on property inventory records following the Department of General Services Guidelines. The cardholder must record all purchases and credits on the Activity Log as they occur and when the monthly bank statement is received, each charge/credit is to be verified to the Activity Log. The cardholder's immediate supervisor must review the Activity Log and bank statement, along with the documentation detailing purchase, to ensure the propriety of purchases and charges. **To document the above, the cardholder and supervisor are to sign and date all pages of the Activity Log and the monthly bank statement**. The original documentation, Activity Log, and bank statement are to be forwarded to the Agency Fiscal Officer for retention for three (3) years or until audited by the Office of Legislative Auditors, whichever is later.

By signing below, the cardholder and their supervisor both certify adherence to all applicable regulations and policies and the performance of the above. Also by signing below, the Fiscal Officer certifies that the bank statement has been reconciled to R*STARS and that an adjustment has been prepared and/or submitted to distribute credit card charges to the proper PCA and Agency Object.

_____	_____	_____
Signature Date	Signature Date	Signature Date
Cardholder	Cardholder's Supervisor/Reviewer	Agency Fiscal Officer/Reviewer

(Revised 5/2/12)