Operational Services

Exhibit - Cardholder's Statement Affirming Familiarity with Requirements for Using District Credit and/or Procurement Cards

Cardholder's name	
Cardholder's address	
Position	
Name of individual who authorized issuance of card.	
I affirm that I am familiar with the Board's policy or understand my responsibilities regarding use of such requirements regarding such cards.	
Cardholder's signature	Date
I provided a copy of this Statement along with a copy Procurement Cards, to the cardholder who signed this st	
Office personnel	Date
IASB Update: December 17, 2018	