

Transaction Summary and Reconciliation Sheet

University of Louisville Procurement Card

Department: _____

Cardholder's Name: _____

Card Account #: _____

Transaction Summary for Month: _____

Reconciler Signature & Date: _____

Approver Signature & Date: _____

Transaction Date	Vendor	Description/Business Purpose	Received	Reallocated	Reconciled	Total Purchase Amount
1						\$
2						\$
3						\$
4						\$
5						\$
6						\$
7						\$
8						\$
9						\$
10						\$
11						\$
12						\$
13						\$
14						\$
15						\$
16						\$
17						\$
18						\$
19						\$
20						\$

Ending Balance:

\$

Reconciliation must be completed and signed by the 15th of the month following receipt of statement.

Completed reconciliation's and supporting documentation shall be retained in the cardholder's department for at least five (5) years.

Reconciliation and supporting documentation must be made available on demand to the departments of Internal Audit, Purchasing, or Controller's Office for review if deemed necessary by these departments.