



**University of the Incarnate Word  
P-Card Program Supervisor Agreement**

As a P-Card Expense Report approver, I will perform proper due diligence in reviewing all transactions to ensure cardholders I am responsible for are adhering to the University's P-card policy and all other applicable policies. I agree to review P-card Expense Reports on a timely basis in accordance with the P-card policy.

As an approver, I am responsible for reviewing all P-card transactions to ensure the following:

- The charges are appropriate business expenses and are made in accordance with University policies.
- There are no charges that are for personal use.
- The charges have a legible, appropriate receipt or other supporting documentation attached.
- The charges do not include taxes from which the University is exempt.
- The charges have been assigned an appropriate account number.
- The charges include a detailed description of the expense.

I acknowledge I may be subject to disciplinary action if I do not adhere to my obligations regarding proper review and approval of P-card transactions.

Policy Provided     ✓     Training Completed     ✓    

\_\_\_\_\_  
NAME (PIDM) \_\_\_\_\_ Date