

VERIFICATION REVIEWER FORM
(For use with Account Maintenance Form)

Verification Reviewer Information

Verification Reviewer: I certify that I will review the purchasing card transaction log monthly to ensure that they have been signed by the cardholder and authorized reviewer.

Verification Retriever Name: _____
(Must not be subordinate to cardholder or authorized reviewer)

Verification Reviewer Signature _____

Title: _____

EmplID: _____

Dept. Name: _____

Email: _____

Telephone: _____

Re-allocation (must attend class if "yes"): Y or N

View Only Access (must attend class if "yes"): Y or N