

T: 657-278-2786 F: 657-278-7666 <http://foundation.fullerton.edu>

***Reference the CSFPF Foundation Card Program Policy to ensure charges made are qualified expenditure.**
This form is used to reconcile monthly transactions identified in the Bank Statement associated with the charging card.

CARDHOLDER INFORMATION

Today's Date: _____	Reconciliation Period: _____
Cardholder's Name: _____	Cardholder's Vendor ID #: _____
Department: _____	Campus Mail Address: _____
Email Address: _____	Phone/Ext.: _____
Prepared By: _____	Preparer's Email Address: _____

RECONCILIATION INFORMATION

#	DETAILED DESCRIPTION & JUSTIFICATION OF GOODS OR SERVICES	ACCOUNT	OBJECT CODE	AMOUNT	COMPLIANCE DOC INCLUDED
If sales tax is not included, current local sales tax will be applied as required by California State Law.				TOTAL:	

CARDHOLDER SIGNATURES

I acknowledge the expenditure(s) listed above meet the educational mission, CSFPF and CSUF policies, and comply with the CSFPF Account Agreement. I attest that each transaction has been properly substantiated, serves a clear business-related purpose, and has no personal benefit derived by the purchasing made.

Cardholder's Signature: _____ Date: _____

APPROVAL SIGNATURES

Two signatures required if the total amount is over \$3,000. Signatures must match those on file. I certify the transactions above are appropriate and comply with the policies and procedures governing the CSFPF Foundation Card Program. I understand once I approve, I retain equal responsibility for all transactions unless corrective action has been noted with the Foundation.

_____ Approving Official's Signature	_____ Print Name & Title	_____ Date
_____ Authorized Account Signature (as needed)	_____ Print Name & Title	_____ Date
_____ Authorized Account Signature (over \$3,000)	_____ Print Name & Title	_____ Date

CSFPF Use Only	
_____ CSFPF Review	_____ Date
_____ CSFPF Approval	_____ Date

Attach all supporting documentation to this Foundation Card Reconciliation Form and submit to CSFPF in CP-850.

INSTRUCTIONAL PROCEDURES

The Foundation's credit card billing cycle generally runs from the 19th of the month (cycle start date) until the 20th of the following month (cycle end date) and due within ten (10) days thereafter.

Cardholders should take the following steps to complete the Foundation Card Reconciliation:

1. Download Foundation Card Reconciliation Form the CSFPF website: <http://foundation.fullerton.edu/policies-forms/>
2. Review Wells Fargo monthly statement and verify transactions are legitimate (please see the CSFPF Foundation Card Policy for dispute procedures)
 - Sign and obtain Approving Officials signature
3. Complete the Foundation Card Reconciliation Form by ensuring the following sections are completed:
 - Cardholder Information
 - Reconciliation Information (itemization of every item purchased within a transaction)
 - Detailed description and justification of item(s) purchased (detailed business purpose)
 - Account and object code allocation (please use the Commonly Used Object Codes to determine an expense type)
 - Amount (if sales tax is not included, current local sales tax will be applied)
 - Use the pull-down menu to identify the compliance document to be included in the packet.
 - Approved Signatures (Cardholder and Approving Official are required to sign, but other signatures are dependent on authorized account signers or expenses totaling \$3,000 or more)
4. Prepare supporting documents which may include the following;
 - Itemized receipt/invoice - individual receipts/invoices smaller than a Letter size (8½ X 11) must be affixed with tape to an 8½ X 11 sheet of paper. The entire top and bottom edges of the receipt must be taped without covering vital information
 - CSFPF Lost & Missing Receipt (LMR) Form - If a receipt is lost and a duplicate copy cannot be obtained from the vendor, then the LMR must be completed. *(Note: Excessive instances of lost or missing receipts may result in the suspension of the Foundation Card.)*
 - Additional documents and compliance forms, which are dependent on purchase type, may include but not limited to the following:
 - Hospitality (D11) Form
 - IT Authorization
 - Membership Justification
 - EHS Authorization
 - Unauthorized Purchase Approval Request
 - Reimbursement documentation
5. Organize packet in the following order: Foundation Card Reconciliation Form, Bank Statement, receipts/invoices followed by additional documentation/compliance forms relative to the specific purchase.
6. Once the packet is completed, please submit to CSFPF in CP-850.

If the reconciliation packet is not received within the reconciliation time period, the packet is considered outstanding. A Cardholder with an outstanding reconciliation packet of 30 days or more will have their Foundation Card suspended until all outstanding packets or pending issues have been received/resolved.

For additional information, please reference the CSFPF Foundation Card Program Policy on the Philanthropic Foundation website: <http://foundation.fullerton.edu/policies-forms/>, or email, CSFPFCard@fullerton.edu.

CHECKLIST

The following checklist serves as a guide through the various steps or items needed of the Foundation Card Reconciliation process:

CARDHOLDERFoundation Card Reconciliation Form

- Cardholder information
- Preparer/Delegate's name
- Itemization of every transaction and items purchased
 - Detailed business purpose/justification*
 - Account and object code allocation*
 - Amount*
 - ID compliance document to be included in packet*
- Applicable signatures

Supporting Documentation

- Bank Statement
- Receipt/invoice for each transaction
- Additional documentation/compliance forms (if applicable)
 - Lost or Missing Receipt Verification Form*
 - Hospitality (D11) Form*
 - IT Authorization*
 - EHS Authorization*
 - Unauthorized Purchase Approval Request*
 - Reimbursement documentation*

APPROVING OFFICIALFoundation Card Reconciliation Packet

- Reconciliation Form is completed in its entirety
- Cardholder has signed Reconciliation Form and Bank Statement.
- Receipts/invoices for each transaction
- Additional documentation/compliance forms (if applicable)
- Reimbursement documents (if applicable)