Texas A&M University Corpus Christi
DCBA Card Audit of Cardholder's Reconciliations

Cardholder's Name: ________________________________

Statement Date: ________________________________

Cardholder Signed: Yes No

Supervisor Signed: Yes No

Who were the Traveler's on this document?

Cardholder: Yes No

List of Others Travelers:
Note if a Traveler is a Student write "student" next to their name.

Type of Funds: Grant Local State Athletics (Circle all that apply)

Are OTR's Present for all E's?
List Date of Travel, Destination, Eff's of all Trips(Phase II)

Are They Approved for Higher Lodging? Yes No: List Missing Not Needed

Are Student Budget Worksheets or Team Budget Worksheet Present?
If a Student is traveling: Object code needs to be as follows:
State - 5410, Local - 3410, Grant - 6031

Are All Receipts Present?
If missing very briefly note what is missing and page number on report Yes No: List Missing Not Needed

Are Business Meal Transactions documented with Business Meal Forms?
Are the Business Receipts Itemized?

Are the Tips or Gratuity on the Receipt or added?
If added must be paid with a Gift Account OK No Tips

Are any Transactions for fuel? If so do they tie to a Rental Car on an OTR? Or may need to look up voucher (phase II)

Does the Object Code and Description for each item match the substance of that Transactions? Yes No

List if the item has a wrong code: Grants have to be fixed. Other accounts are dependent on $ amount.

Are there any Transactions that have a P. O. Number that starts with an L? Yes No

Are these transactions related to a Travel, such as registration?

L# must be provided.
Other Issues not mentioned above but noted upon review/list page number of Reconciliation or reference the receipt.

List Date of Travel, Destination, Eff's of all Trips(Phase II)