

**P-Card Holder's Name** \_\_\_\_\_,      **Date:** \_\_\_\_\_

*By signing/approving this expenditure, I certify to the best of my knowledge and belief that the expenditures, disbursements and any related cash receipts are for the purpose and objectives set forth in the terms and conditions of the Federal award and the costs are reasonable and consistent with the requirements of AWC. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 10001 and Title 31, Sections 3729-3730 and 3801-3812).*

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**SIGNATURE:**