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Iechyd Cyhoeddus  
Cymru  
Public Health  
Wales

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## PURCHASING CARD PROCEDURE AND GUIDANCE

### Introduction and Aim

The Standing Financial Instructions (SFIs) detail the financial responsibilities, policies and procedures adopted by Public Health Wales NHS Trust (PHW). The SFIs do not provide detailed procedural advice and should be read in conjunction with the detailed departmental and Financial Control Procedure (FCP) notes.

This procedure ensures that the Trust has clear guidance in place for the issuing, usage and governance of Purchasing Cards.

The aim of the Purchasing Card Scheme is to reduce paperwork and administration time involved in the ordering and invoicing process for low value, ad hoc goods and services not covered by any purchasing agreements or contracts.

### Linked Policies, Procedures and Written Control Documents

[All corporate policies and procedures are available on the Public Health Wales website](#)

Other written control documents which have been identified to have interdependencies with this procedure and should therefore be read in conjunction with, include;

- [Standing Financial Instructions](#)
- [Counter Fraud, Bribery and Corruption Policy](#)
- [NHS Wales Purchasing Compliance Guide](#)
- [All Wales Procure to Pay e-Manual](#)

### Scope

This procedure is Trust wide and applies to Purchasing Cardholders and Finance Division staff who advise on the use of purchasing cards.

### Equality and Health Impact Assessment

An Equality, Welsh Language and Health Impact Assessment has been completed and can be viewed on the policy webpages.

### Approved by

Audit and Corporate Governance Committee

|  |  |
|--|--|
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| <b>Summary of reviews/amendments</b> |                        |                         |                       |  |
|--------------------------------------|------------------------|-------------------------|-----------------------|--|
| <b>Version number</b>                | <b>Date of Review</b>  | <b>Date of Approval</b> | <b>Date published</b> | <b>Summary of Amendments</b>   |
| 1.0                                  | August – December 2023 | 29 January 2024         | 16 February 2024      | <p>A guidance document has existed since 2013, however, this is the first time the guidance has been formalised into a financial procedure.</p> <p>Key amendments since the last guidance document include:</p> <ul style="list-style-type: none"> <li>• Use of relevant corporate policy/procedure template and creation of Equality and Health Impact Assessment.</li> <li>• Reference to fraud prevention included.</li> <li>• Updated links to linked procedures included.</li> <li>• List of exemptions extended to include staff gifts, capital expenditure and catering for staff.</li> <li>• Reference to new quarterly data review introduced in 2023 included.</li> <li>• 'Cardholder Specific Details' form removed from appendices as this is no longer used in the process.</li> <li>• Addition of Monthly Transaction Limit and Single Transaction Limit to the Cardholder Agreement template</li> </ul> |

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## 1 Introduction

The main objective of the Purchasing Card Scheme (the 'scheme') is to reduce paperwork and administration time involved in the ordering and invoicing process for low value, ad hoc goods and services not covered by any purchasing agreements or contracts.

This procedure provides guidance for the issuing, usage and governance of the Purchasing Card (the 'card').

Each cardholder is issued with a copy of this document and their individual spending limits under which they can use their card. All purchases should be made in accordance with these procedures and Public Health Wales NHS Trust Standing Orders and Standing Financial Instructions.

The cardholder may only use the card for business purposes and may under no circumstances use the card for private transactions. If the cardholder requires any further clarification or information regarding this, they should contact the Purchasing Card Administrator (the 'administrator') in the first instance.

## 2 Overview of the Purchasing Card Process

New Cardholders must complete a Barclaycard Cardholder Application form. These are available from the Purchasing Card Administrator. This form will make a permanent record of the card and user details of each card issued.

Certain types of goods or services will require that specific approved suppliers are used and normal Procurement policies and procedures should be followed. The Procurement Department will provide further details on request. Alternatively, a link to the All Wales Procure to Pay e-Manual can be found on the first page of this procedure.

The **cardholder only** will conduct the card transaction. This can be over the telephone, on a face-to-face basis, via the Internet (using a secure website and ensuring the card number is not included in any e-mail message/correspondence) and by postal booking forms or subscription requests.

**N.B. For data protection, fraud prevention purposes and purchasing card security measures, card details must not be**

**stored or saved on any computer or internet site, for example, PayPal or Amazon.**

Within 4 working days of the transaction, the card issuing bank will pay the supplier.

Monthly statements from Barclaycard Banking Services are received by the Trust, which provide an overall summary and also individual statements detailing the transactions that have been made by each cardholder.

## **3 Card Housekeeping**

### **3.1 Purchasing Card Scheme**

The scheme is held in the name of Public Health Wales NHS Trust and will be maintained and administered by a nominated authority of Public Health Wales Trust. The nominated authority will be the Purchasing Card Administrator.

### **3.2 Purchasing Card Administrator**

The nominated Purchasing Card Administrator (the 'administrator') is the [Finance Support Accountant](#). Queries and monthly returns should be directed to the administrator. Other members of the Finance Division have administrator access if the nominated Purchasing Card Administrator is unavailable.

### **3.3 Purchasing Card Amendments**

The cardholder must inform the administrator if for any reason the cardholder's name or other details need amending. The obsolete card should be cut in half across the magnetic strip and then destroyed.

### **3.4 Purchasing Card Renewals**

When the card reaches the expiry date, a replacement card should be received approximately 14 days prior to the renewal date. Non receipt should be advised immediately to the administrator.

### **3.5 Security of the Purchasing Card**

The card issued to the cardholder is to be used by the cardholder only and should not be used by any other individual. The security

of the card is the responsibility of the cardholder who must ensure that it is retained in a secure location and that the card number is not revealed to any unauthorised person(s). The card must be used for business purposes only and must not be used for personal use in any circumstances. If in the unlikely event of the card being used for personal use in error, the administrator must be informed immediately and the appropriate action will be taken (e.g., full investigation, recovery of money and any necessary disciplinary action instigated).

On receipt of the card, the cardholder and line manager/budget holder are required to sign a 'Cardholder Agreement Form' to confirm that the cardholder understands and consents to the card procedures detailed herein. A copy of the Cardholder Agreement Form can be found at Appendix 3.

### **3.6 Lost/Stolen Cards**

If the card is lost or stolen, the issuing bank Barclaycard must be advised immediately by telephone on the Barclaycard 24-hour customer service helpline.

Telephone number: 0870 0101 152

The Barclaycard card lost/stolen card incident report must be completed, and a copy forwarded to the administrator for review and action accordingly. A copy of the Lost/Stolen Incident Report form can be found at Appendix 4.

### **3.7 Job Change/Department Change**

Upon notice of a change of job and/or departmental change, the cardholder must inform the administrator as soon as possible. If there is a requirement for the new role and/or department to have a purchasing card, the cardholder can retain their current procurement card. A new cardholder agreement should be completed and approved by the new line manager. If there is no requirement for the new role and/or department to have a purchasing card, the 'Leaving Employment' process noted below in section 3.8 should be followed.

### **3.8 Leaving Employment**

When a cardholder notifies their line manager that they will leave employment with the Trust, the line manager must notify the Administrator as soon as possible so arrangements can be made to close the cardholder's account. The cardholder must return the card

to the administrator. The administrator will destroy the card by cutting it through the magnetic strip and through the chip.

### **3.9 Cardholder Liability/Credit Status**

Whilst the card is embossed with the cardholder's name; the account, and therefore the financial liability, is in the name of Public Health Wales NHS Trust. Consequently, there is no impact on the cardholder's personal credit status.

However, it is important to note that the cardholder remains personally responsible that the use of the card is in accordance with these Purchasing Card Guidance and Procedures. Any fraudulent use of the card may ultimately lead to disciplinary proceedings.

### **3.10 Training and Guidance**

A pre-condition for the use of the card is that the cardholder should have received appropriate guidance for using the card (with the cardholder's line manager/budget holder in attendance if required). This training could be given virtually, and the purpose is to introduce the cardholder to the scheme by explaining the procedure and guidelines. The cardholder must complete the Cardholder Agreement form (Appendix 2) which includes agreeing that they understand the procedures and have read the guidelines.

## **4 Purchasing Card Application**

Upon receipt of a request by the departmental manager for a card, a decision must be made as to who will be the cardholder within the department.

A request from the Head of Department/Departmental Manager will be made to the administrator. A cardholder application form will be sent to the individual with an explanatory memorandum attached, these will include:

- a) Cardholders application forms –Barclaycard form to be completed by the cardholder.
- b) Purchasing Card Guidance and Procedures including appendices.

Completed forms must be returned to the Card Administrator via email.



The authorised forms will be sent to the card issuing bank. The bank will despatch the card and Personal Identification Number (PIN) under separate cover directly to Finance.

The Administrator will send the card and PIN separately to the cardholder. The cardholder and line manager/budget holder must sign and return the Cardholder Agreement form (Appendix 2) acknowledging receipt and agreeing to comply with the use of the cards terms and conditions.

## **5 Transaction Approvals and Statements**

Once the application process is complete and the card and PIN have been issued and the Cardholder Agreement has been duly authorised, the new cardholder can commence using the card.

All purchases must be in accordance with these procedures and guidelines as issued at the time of the application.

Travel and subsistence purchases should be made in accordance with the [Agenda for Change Terms and Conditions](#) for reimbursement of Travel and Subsistence.

If booking and purchasing overseas travel, please ensure the [overseas travel form](#) is completed and approved, prior to booking.

Before making any purchases, a 'Purchasing Card Transaction Request Form' (copy of which can be found at Appendix 4) must be completed and authorised by the relevant line manager/budget holder (or delegated person as detailed in the Standing Financial Instructions). All Purchasing Card Transaction Request forms must be retained locally for audit purposes.

At the end of every month a 'Purchasing Card Monthly Account' form (see Appendix 5) must be completed. The transactions on this statement will be correctly coded and reconciled to the transaction request forms for the relevant month. Copies of the Purchasing Card Monthly Account must be returned to the Administrator as close to the statement date (21<sup>st</sup> of month) as possible.

Digital invoices and receipts (or scanned copies where physical documents are received) for each transaction should be retained by the cardholder for further inspection when requested during routine scheme audits and/or any individual transaction queries.

Every month the Finance Support Accountant will reconcile each cardholder's monthly account to the credit card statement received from the bank.

Should any queries or anomalies arise, these must be resolved by the Finance Support Accountant and the cardholder in an accurate and timely manner. Any irregularities will be reported to the Card Administrator.

## **6 Limits**

### **6.1 Monthly Credit Limit**

A monthly credit limit has been set for each cardholder and is detailed in the Cardholder Application Form. If this limit is found to be insufficient for their purchasing needs, the cardholder's line manager/budget holder should contact the administrator to discuss any revision to the limits.

### **6.2 Transaction Limit**

The Trust has an agreed maximum transaction limit for each card. The current limits for individual transactions will be detailed in the Cardholder Application Form and will be included on the Trust Cardholder Agreement. The card should not be used for purchases in excess of this limit. Attempting to purchase in excess of this limit will be met with a decline when authorisation is sought for the transaction. The total transaction limit is inclusive of any VAT, carriage charges, etc. Transactions cannot be split in order to remain within the maximum transaction limits. Expenditure limits can be amended. Approval must be sought from both the cardholder's line manager/relevant budget holder and the Head of Financial Reporting and Control before being actioned. A request must be sent to the Administrator, giving at least one month's notice.

## **7 Transactions**

The card can potentially be used at any supplier outlet displaying the Visa/MasterCard logo, provided the card has been set with the appropriate merchant categories.

Suppliers that accept the card are categorised into three levels.

Level 1 – Suppliers who provide total cost (including VAT) of the transaction only.

Level 2 – Suppliers who provide a summary description as well as details of the VAT, gross and net costs of the transaction.

Level 3 – Suppliers who provide the same as Level 2 and also line item detail for the transaction(s). This gives as much detail of each transaction as normally provided with an invoice and would show the breakdown of an order into individual items.

Using the card with suppliers that are Level 2/3 compliant means that the supplier can accept a customer reference (information provided by the cardholder at the time of the order e.g. purchase order number) and capture the transaction's VAT details. This will then appear on the cardholder transaction report/statement. When using level 2 and 3 suppliers, the customer reference must be quoted at all times at the point of sale (when appropriate).

## **8 Exceptions – Items and Commodities not to be Purchased**

The purchasing card should never be used to circumvent Procurement processes. The following items/commodities must **not** be purchased using the card:

- Automotive fuel
- Purchases from restaurants and bars (with exception retirement process)
- Cash
- Goods available from Welsh Health Supplies, Central Stores in Bridgend
- Mobile phones
- Items covered by Purchasing Agreements or Contracts (for example; stationery, electrical supplies, IT equipment, office supplies).
- Regularly used items or services
- Items considered to be capital (for example some IT purchases)
- Staff gifts (with exception of those under the retirement process)
- Refreshments/catering for staff

In addition to the above items which should not be purchased, cardholders should not make online purchases through personal accounts via 'cashback websites' (for example, Quidco).

It must be noted that purchases using the card are subject to the same procedures that control other Trust purchases. In particular the purchase of any medical, electrical or IT equipment must be approved in the normal manner and in accordance with Trust procedures. The cardholder must pass the information to the relevant department personnel i.e. Estates & Facilities, Infection Control, Digital Services, etc.

## **9 Monthly Review Process**

The Finance Division will undertake a monthly review of all transactions to ensure compliance with the guidelines. Cardholders will be contacted if there are queries on any items for further explanations, and these will be regularly reported to the Director of Finance. Further investigations will be undertaken if necessary. Quarterly data is reviewed by the Finance Business Partners and reported to the relevant Directorates.

## **10 Raising Transactions and Placing Orders**

The cardholder training will have covered all the stages that the cardholder must take each time that a transaction is raised. In brief the requirements are as follows:

The cardholder personally needs to place the order. This can be carried out in the following ways:

1. Ordering the goods/service by telephone and quoting the card number. Telephone orders should be delivered to a site address and not to the cardholder's private address.
2. Ordering by mail, where an application form can be completed with details of the card payment.
3. Personally visiting the supplier's premises and signing for goods.
4. Placing an order to a supplier's secure website via the Internet.

**N.B. For data protection purposes and purchasing card fraud prevention measures, card details must not be stored or saved on any computer or internet site, for example, PayPal or Amazon.**

In all instances the cardholder must inform the supplier of:

- The full card number and date of expiry
- The full name of the cardholder (as shown on the card)
- The Trusts full name

- The Card Verification Value (CVV) Code

**N.B. for security reasons, in NO circumstances should the cardholder release the PIN to any suppliers except during face to face transaction entry order also ensuring the PIN is not disclosed. When documentation is used for ordering, the cardholder should not leave paperwork around displaying the card number.**

#### Ordering by Mail/Telephone/Internet

When undertaking transactions by mail, telephone ordering or over the internet, the cardholder may be asked to quote the last three digits of the number printed within the signature strip on the reverse of your card (CVV number). The cardholder should not be asked for, nor reveal the PIN, in any circumstances.

The cardholder will also need to quote:

- The full delivery address
- A clear description of the goods required

#### Card Declined

If a transaction is declined, please refer to the administrator. For example, some potential causes maybe – exceeding monthly card limit, exceeding individual transaction limit or using a supplier that is within a category disallowed by the Trust.

#### Rejection of Goods/Goods Incorrect

If the goods are rejected for any reason, the cardholder must ensure that the supplier is informed directly, as it is the supplier who will arrange a credit to the Purchasing Card account. The credit will appear on the cardholder's record of transactions and it is the responsibility of the cardholder to carry out regular checks to ensure the credit is received correctly.

If the cardholder is unable to reach a mutual agreement with the supplier, the cardholder must contact the administrator immediately.

#### Incorrect Amount Billed

Please see "Transaction Approval and Statement" above for procedures which will be followed.

#### Billed but Goods not Received

If the cardholder is billed for purchases that have not been received, the cardholder should contact the supplier to ensure that the goods

have been despatched. It is the issuing bank and the Purchasing Card's regulations that transactions are not processed until the goods are despatched. The administrator must be informed immediately if this directive has been breached.

## **11 Summary**

The Purchasing Card Scheme is designed to be simple and easy to use whilst providing the goods and services required to perform the cardholder's job role in an efficient manner. It should also provide assurance that appropriate controls are continually maintained which would ensure the ongoing success of the scheme.

The cardholder is requested to exercise good judgement and to act responsibly when using the card to ensure that value for money is obtained. The card is issued in the cardholder's personal name and all activity will be assumed to have been incurred by the named cardholder.

To ensure the schemes continued success, random audits will be conducted for both card activity and retention of transaction reports, receipts and invoices. Suspension of the card or disciplinary procedures would be invoked for any improper use of the card facility.

The monitoring and review of this procedure is the responsibility of the Head of Financial Reporting and Control in the Financial Accounts team. Reviews will be undertaken every 3 years, or when changes are identified prior to the required review date.

## 12 Appendices

### APPENDIX 1

#### **PUBLIC HEALTH WALES NHS TRUST SUMMARY OF PURCHASING CARD PROCESS**

1. Each request for a card must be made to the administrator by the line manager in the first instance.
2. The Purchasing Card Scheme guidance and procedure along with the relevant Barclaycard Application forms will be sent to the requesting officer.
3. The Purchasing Card Procedure and Guidance must be read and the Barclaycard Cardholder Application Form must be completed and signed by the appropriate line manager and returned to the administrator.
4. The administrator will return the completed application forms to the issuing bank when authorised.
5. The issuing bank will send the card and Personal Identification Number (PIN) to the Purchasing Card Administrator on acceptance. The administrator will register the card details and forward to the cardholder. The issuing bank will send the PIN under separate cover to the Finance Division.
6. On receipt of the card by the cardholder, Appendix 2 (Cardholder Agreement) must be duly completed by the cardholder and line manager and returned to the administrator prior to any use of the card.
7. For each card transaction, Appendix 4 (Purchasing Card Transaction Request Form) must be completed and authorised accordingly.
8. By the 21<sup>st</sup> of the following month, Appendix 5 (Purchasing Card Monthly Account) must be completed and sent to the [Finance Support Accountant](#).
9. Public Health Wales NHS Trust will receive the Purchasing Card Statement from the issuing bank by the 21<sup>st</sup> of the month and payment will be made on this date.
10. The Financial Support Accountant will reconcile all transactions from the Purchasing Card Monthly Accounts to

the statement from each cardholder and resolve any queries in a timely manner.

11. If the Purchasing Card becomes lost or stolen, please contact Barclaycard 24 hour customer service helpline immediately. The Lost/Stolen Incident Report (Appendix 3) must be completed and countersigned by the line manager/budget holder and then sent to the card administrator



## APPENDIX 2

# PUBLIC HEALTH WALES NHS TRUST

## CARDHOLDER AGREEMENT

I acknowledge receipt of NHS Purchasing Card Number \_\_\_\_\_  
Monthly expenditure limit £ \_\_\_\_\_  
Single transaction limit £ \_\_\_\_\_

As a cardholder I agree to comply with the following terms and conditions regarding my use of the Purchasing Card (the 'card').

- a. I have received and understood that I am being entrusted with a card and will be making financial commitments on behalf of Public Health Wales NHS Trust. Where stipulated I will be using designated suppliers as identified by the Procurement Department.
- b. I understand that Public Health Wales NHS Trust is liable to the card provider for all the charges made on the card.
- c. I agree to use this card for Public Health Wales NHS Trust business purchases only and agree not to charge personal purchases. I understand that the Trust will audit the use of this card and report and take appropriate action on any discrepancies.
- d. I will follow the established procedures for the use of the card. Failure to do so may result in either revocation of my privileges and/or any other disciplinary action, including termination of employment.
- e. I have been given a copy of the Purchasing Card Guidance and Procedure document and understand the requirements for the use of the card including the exceptions listed in the procedure.
- f. I agree to return the card immediately upon request or upon termination of employment (including retirement). Should there be any organisational change, which cause my purchasing requirements to change, I agree to return my card and arrange for a replacement, if appropriate.
- g. If the card is lost or stolen I agree to notify Barclaycard immediately and the Purchasing Card Administrator as soon as possible thereafter.

|                         |  |
|-------------------------|--|
| Cardholder Signature:   |  |
| Print Name:             |  |
| Date:                   |  |
| Line Manager Signature: |  |

|   |  |
|---|--|
| Print Name:                                 |  |
| Date:                                       |  |
| Purchasing Card<br>Administrator Signature: |  |
| Print Name:                                 |  |
| Date:                                       |  |

### APPENDIX 3

## PUBLIC HEALTH WALES NHS TRUST

### LOST/STOLEN CARD INCIDENT REPORT

|  |  |
|--|--|
| <b>CARD NUMBER</b>                       |  |
| <b>CARDHOLDER NAME</b>                   |  |
| <b>CARDHOLDER DEPT</b>                   |  |
| <b>DATE OF INCIDENT</b>                  |  |
| <b>INCIDENT DETAILS</b>                  |  |
|  |  |
| <b>ACTION TAKEN</b>                      |  |
| <i>To be completed by cardholder:</i>    |  |
|  |  |
| <i>To be completed by administrator:</i> |  |
|  |  |

#### Cardholder Indemnity

I certify that the above describes an accurate reflection of the incident that has occurred.

I confirm that I have undertaken all the necessary actions to mitigate the incident actually occurring.

|  |  |
|--|--|
| Cardholder Signature:                    |  |
| Date:                                    |  |
| Line Manager/Budget Holder Signature:    |  |
| Date:                                    |  |
| Purchasing Card Administrator Signature: |  |
| Date:                                    |  |

**APPENDIX 4**

**PUBLIC HEALTH WALES NHS TRUST**

**PURCHASING CARD TRANSACTION REQUEST FORM**

|   |  |                    |                        |                    |  |
|---|--|--------------------|------------------------|--------------------|--|
| <b>REFERENCE NUMBER:</b>  |  |                    |                        |                    |  |
| <b>DATE OF REQUEST:</b>   |  |                    |                        |                    |  |
| <b>DIRECTORATE/DIVISION:</b>  |  |                    |                        |                    |  |
| <b>REQUESTED BY:</b>  |  |                    |                        |                    |  |
| <b>ITEM(S) REQUESTED:</b><br>(if rail travel – please give details below) |  |                    |                        |                    |  |
| <b>SUPPLIER DETAILS:</b>  |  |                    |                        |                    |  |
|   |  |                    |                        |                    |  |
| <b>RAIL TICKET DETAILS (if required):</b>                                 |  |                    |                        |                    |  |
| <b>Passenger:</b>   |  |                    | <b>Date of travel:</b> |                    |  |
| <b>From:</b>  |  |                    | <b>To:</b>             |                    |  |
| <b>Ticket type:</b> Standard/day return/open return                       |  |                    |                        |                    |  |
| <b><u>Out</u></b>   |  |                    | <b><u>Return</u></b>   |                    |  |
| From: _____   |  |                    | From: _____            |                    |  |
| To: _____   |  |                    | To: _____              |                    |  |
| Date: _____   |  |                    | Date: _____            |                    |  |
| Train times: _____  |  |                    | Train times: _____     |                    |  |
| <b>TOTAL COST:</b>  |  |                    |                        | £                  |  |
| <b>COST CENTRE:</b>   |  |                    |                        | <b>SUBJECTIVE:</b> |  |
| <b>Budget Holder Signature:</b>   |  | <b>Print Name:</b> |                        | <b>Date:</b>       |  |
| <b>Card Holder Signature:</b>   |  | <b>Print Name:</b> |                        | <b>Date:</b>       |  |
| <b>DATE CHARGED TO CARD:</b>  |  |                    |                        |                    |  |

- ***Please ensure all fields are accurately completed.***
- ***For multiple purchases, please ensure a breakdown is provided in the narrative.***
- ***All purchasing Card Transaction Request Forms MUST be signed by the budget holder before being accepted and processed by the Cardholder.***

**APPENDIX 5**

**PUBLIC HEALTH WALES NHS TRUST  
PUCHASING CARD MONTHLY ACCOUNT**

|                    |  |                        |  |                    |  |
|--------------------|--|------------------------|--|--------------------|--|
| <b>CARD NUMBER</b> |  | <b>CARDHOLDER NAME</b> |  | <b>MONTH ENDED</b> |  |
|--------------------|--|------------------------|--|--------------------|--|

| <b>DATE</b> | <b>SUPPLIER/NARRATIVE<br/>(please include destination from/to if booking travel)</b> | <b>COST CENTRE</b> | <b>SUBJECTIVE</b> | <b>AMOUNT (£)</b> |
|-------------|--|--------------------|-------------------|-------------------|
|             |  |                    |                   |                   |
|             |  |                    |                   |                   |
|             |  |                    |                   |                   |
|             |  |                    |                   |                   |
|             |  |                    |                   |                   |
|             |  |                    |                   |                   |
|             |  |                    |                   |                   |
|             |  |                    | <b>TOTAL</b>      | £ -               |

|  |  |  |
|--|--|--|
| <p><b>Authorised Purchasing Card Transaction Request forms<br/>have been obtained for all above transactions</b></p> |  | <p><b>Please send form to:</b><br/> <b>FAO. Daniel Brown, Finance Support Accountant</b><br/> <a href="mailto:daniel.brown@wales.nhs.uk">daniel.brown@wales.nhs.uk</a></p> |
|  |  |  |

**End of Procedure and Guidance**