

**P-Card Self-Assessment
Attestation by Internal Investigations or Audit Unit**

The undersigned hereby represents the following:

1. I am the head of internal investigations or audits at (name of entity for this self-assessment submission): _____.

2. I understand that verified or suspected cardholder misuse, abuse and fraud must be reported to the Georgia Department of Administrative Services.

3. I have reviewed the Purchasing Card Self-Assessment. To the best of my knowledge, the information reported is accurate and complete.

Name (print/type)

Signature

Position

Date