

I, _____, **(print name)** acknowledge receipt of a Bank of America Visa Purchasing Card. As a Cardholder, I agree to comply with the following terms and conditions regarding my use of the Card.

By signing, all signees agree to checked items below, as well as acknowledges their accountability for each item.

- ✓ I understand that I am being entrusted with a valuable purchasing tool and will be making financial commitments on behalf of my agency and will strive to obtain the best value for the University by using State contracts and other “preferred suppliers” as identified by the University’s Purchasing Department.
- ✓ I understand the University is liable to Bank of America for all authorized charges made on the Card.
- ✓ I agree not to share my Card or Card number with anyone other than a vendor with which I am doing business. I agree if I share my Card or Card number with anyone other than a vendor I am doing business with, the University will take disciplinary action as a result.
- ✓ I agree to use this Card for approved purchases only and agree not to charge personal purchases. I understand the University will review the use of this Card and related management reports and take appropriate action based on any discrepancies.
- ✓ I agree to follow all State regulations and University Policies & Procedures related to procurement and the PCard. I fully understand that failure to do so may result in either revocation of my privileges or other disciplinary actions, up to and including termination of employment.
- ✓ I agree to return the Card immediately upon request or upon termination of employment (including retirement). Should there be any organizational change that causes my cost center to change, I also agree to return my Card and arrange for a new one, if appropriate.
- ✓ If the Card is lost or stolen, I agree to notify Bank of America, the University’s Program Administrator and my Approver immediately.
- ✓ I agree to successfully complete annual Cardholder training, as well as sign a new employee agreement at each card renewal period.
- ✓ I agree not to use my Card to pay past due invoices to circumvent Prompt Pay policies and procedures and will contact Procurement Services for guidance on past due invoice payment.
- ✓ When returning merchandise, I will specifically request the credit to be issued to the Purchasing Card.
- ✓ I agree not to write down or share my Card’s pin number with anyone, including my Approver, University Program Administrator, or Bank of America.
- ✓ I understand that Chip and PIN technology is only utilized at point of sale by vendors who have chip enabled terminals.
- ✓ I will not store my card number on any mobile devices, nor will I utilize any type of mobile payment or digital wallet service such as Apple Pay, Google Pay, Samsung Pay, etc.
- ✓ I understand personal use/misuse must be repaid by the employee. Failure may cause funds to be withdrawn via Payroll.

Employee Signature/Date

Card Reviewer/Approver Signature/Date

Employee UIN

Card Approver/Reviewer Name (Printed)

Department Name

Budget Unit Director Signature/Date