

Name: _____

Employee ID: _____

**Florida State University Purchasing Card Program
Purchasing Cardholder Agreement**

I verify that I have read the Florida State University Policy and Procedures regarding use of the Florida State University Purchasing Card (hereinafter P- Card). I understand that I am being entrusted with a powerful and valuable tool and will be making financial commitments on behalf of the University and will strive to obtain the best value for the University. I further affirm that:

_____ I have reviewed the P-Card User Manual at procurement.fsu.edu and have accomplished training on _____, _____ and understand my responsibilities as a Cardholder in the P-Card Program. I have been given an opportunity to ask questions to clarify my understanding of the P-Card program. I understand the P-Card is FSU Property as are any goods or services purchased with the P-Card.

_____ I will follow Federal, Florida Law and FSU purchasing policies, along with established guidelines for using the P-Card. I understand a failure to do so may result in revocation of my card privileges and/or disciplinary action.

_____ I will review transactions in a timely manner and will maintain all applicable information and will sign and forward all receipts to the proxy. I understand I must review a monthly statement of my charges and ensure all my purchases are appropriate and accurate.

_____ I understand, if using the card to make purchases for my department or the University, I am authorized to use the card only for those materials authorized to be purchased under Florida State University P-Card Program Policies and Procedures outlined in the P-Card Manual.

_____ I understand that at NO TIME am I authorized to use the card for personal gain, to make personal purchases for myself or others, or to submit a claim for reimbursement of any expense charged to the Card. Willful intent to use the P-Card for personal gain or unauthorized use may result in disciplinary actions up to and including termination of employment and prosecution to the extent permitted by law.

_____ I understand that if, due to mistake or omission, improper use of the card occurs, I have a duty to report it immediately to my supervisor and the Administrator of the P-Card Program.

_____ I understand the P-Card Transactions Limits to be: \$2500.00 per Individual transaction and per vendor per day unless my Dean or Director has requested a different limit. I understand that "splitting" a higher amount charge into multiple charges is prohibited and I will be held responsible or may lose card privileges if done.

_____ I understand and agree that should I violate any of the terms of this agreement, I will be subject to disciplinary action up to and including termination of employment. I also agree that I will reimburse Florida State University for all charges incurred as a result of any unauthorized use. I also understand that such charges could be deducted from any money which would otherwise be due and owing me, including salary and wages, in accordance with Rule 69I-21.004, F.A.C. Finally, I understand that misuse of the card may be grounds for criminal charges and the University is obligated under the Cardholder agreement with Bank of America to cooperate with law enforcement authorities to the fullest extent of the law.

Cardholder's Name (Print)

Witness (Print)

Cardholders' Signature

Witness Signature

Date

Date