**Employee Procurement Card Agreement**

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| --- |
| I, , hereby request a Purchasing Card. |

(Typed name as in Beacon, First, Middle Initial Last Name, no nicknames)

|  |  |
| --- | --- |
| Email: | Work Phone: |

|  |  |  |
| --- | --- | --- |
| Type of Card: Mark one or the other and must complete a form for each type | Regular: | CI: |

|  |  |  |
| --- | --- | --- |
| Note: Per Transaction Limit and Monthly Credit Limit. | Regular - $2500 per transaction and a monthly credit limit of $10,000 | CI - $2500 per transaction and a monthly credit limit of $25,000 |

As a Cardholder for the North Carolina Department of Natural and Cultural Resources (hereinafter the Department) and the Division of

|  |  |
| --- | --- |
| Parks & Recreation | Park and/or Section: |

(Insert Park or Section Name Above),

I agree to comply with the following terms and conditions regarding my use of the card.

1. I understand that I am being entrusted with a valuable tool, a Purchasing Card, and will be making financial commitments on behalf of the Department and will strive to obtain the best value for the Department.

Initial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. I understand that the Department is liable to Bank of America for all charges made on the card. I further understand that I may be personally liable for any funds misused with this card.

Initial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. I agree to use this Card for approved purchases and only funds may be expended for the programs, purposes, objects, and line items or as otherwise authorized by the General Assembly for DNCR. I understand it is a violation of Department policy to charge personal purchases to the card entrusted to me. I understand that the Department Controller’s Office and Purchasing Department Personnel will audit the use of this Card and report/take appropriate action on any misuse of the Card. Initial \_\_\_\_\_\_\_\_\_\_\_\_\_

4. I agree to make sure no tax is charged against any purchase I make and I agree to reimburse the Department any tax charged against the card that is not credited within 30 days. Initial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. I will follow the established procedures for the use of the Card. Failure to do so may result in either revocation of the card privileges or other disciplinary actions, including discipline in accordance with the Human Resources Employee Manual, up to and including dismissal. Initial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. I have been given a copy of the DPR Quick Reference Purchasing Guide as well as the Department of Cultural Resources Purchasing Card Policy and Procedures Manual and understand the requirements for the Card's use. Initial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. I agree to submit the purchasing log and receipts on time each week as required in the Purchasing Card Policy and Procedures Manual. Initial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. I agree to return the Card immediately upon request of my Supervisor/DPR Budget Office or Department head or upon notice of termination of employment (including retirement) with the Department. Upon notice of transfer from my current Division within the Department, I agree to return this card for immediate cancellation and arrange for a new one, if appropriate.

9. If the Card is lost or stolen, I agree to notify Bank of America, DPR Budget Office and DNCR Card Administrators immediately.

Initial \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Division Director Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Division Budget Officer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_