**CLAYTON STATE UNIVERSITY**

***EMPLOYEE AGREEMENT FOR STATE P-CARD PROGRAM***

I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, herby acknowledge receipt of Clayton State University Purchasing Card (P-card), on this \_\_\_\_\_ day of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_. This is a Visa card issued by Bank of America, card number (last four digits)-\_\_\_\_\_\_\_\_, expiration date\_\_/\_\_\_\_\_\_, which will only be used to acquire items dictated by the P-card policy and procedures, for the University. I agree to comply with the following terms and conditions relating to my usage of the P-card.

1. As an authorized cardholder, I agree to comply with the terms and conditions of this agreement and with the provisions of all P-Card Policies and Procedures. I have received P-Card instructions and acknowledged that I can print and/or read and review the P-Card Policies and Procedures from the Procurement Services web site <http://www.clayton.edu/procurement/>. I confirm that I have read and understand the terms and conditions of its use.

2. I understand the University is liable to Bank of America for all charges that I make on the P-Card.

3. I agree to use the P-Card for authorized official business purchases only and agree not to charge **personal purchases or any other disallowed items**. Failure to comply shall result in either revocation of my use or privileges or other disciplinary actions, including disciplinary action. I understand there will be audits on the use of this purchasing card and any discrepancies will be addressed pursuant to O.C.G.A.

4. I understand purchasing card holders, approvers and supervisors may be criminally prosecuted for P-card misuse. Purchasing card misuse may result in civil and criminal penalties.

**5. I authorize Clayton State University to take whatever steps are necessary to collect an amount equal to the total of improper purchases, including but not limited to declaring such purchases an advance on my wages**

**to the extent allowed by law.**

6. I understand improper or fraudulent use of the Purchasing Card may result in disciplinary action, up to and including termination of my employment as well as criminal prosecution. I further understand that Clayton State University may terminate my right to use the Purchasing Card at any time for any reason.

7. If the Purchasing Card is lost or stolen, I will **immediately** notify Bank of America at 1-888-449-2273. I will also notify the Clayton State University Purchasing Card Administrator by phone and in writing at the first opportunity

during normal business hours at **678-466-4280** or e-mail [marciajones@clayton.edu.](mailto:marciajones@clayton.edu)

8. I agree to notify the Clayton State University Purchasing Card Administrator at **678-466-4280 o**r [marciajones@clayton.edu](mailto:marciajones@clayton.edu) if my name changes or contact information changes. I further acknowledge name changes will require proof of change i.e. copy of marriage certificate.

**9.** I understand and will comply with the designated purchasing limits allowed. A purchase **WILL NOT be split into multiple transactions to stay within the single purchase limit.**

10. I agree to return the Purchasing Card immediately upon request or upon termination of employment for any reason.

11. I have successfully completed an **online USG ethics and conflict of interest training course** through the Office of Human Resources.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Print Name of Cardholder Signature of Approver (Immediate Supervisor)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Cardholder’s Signature/ Date P-Card Program Administrator’s Signature/Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Chief Financial Officer’s Signature/Date**