

California State University Stanislaus – PCard Cardholder Agreement

Date: _____

New Card

Change/Update Existing Card

Name of Cardholder _____ Employee Status: Perm Temp End Date _____

Department _____ Telephone _____ Email _____

The Cardholder accepts the authority and responsibility to utilize the PCard authorized by the appropriate budget owner for University expenses within the limits established by the department. The Cardholder agrees to prepare a monthly statement to verify the accuracy of the PCard billings using US Bank Access Online. The Cardholder further agrees to forward the statement with all required supporting itemized receipts and documentation to the Cardholder's Approving Official. The Approving Official is responsible for reviewing, signing and forwarding the authorized statement to the PCard Administrator to arrive on or before the communicated deadline. If a card is lost, stolen or compromised, the Cardholder must notify US Bank (800.344.5695), the Approving Official and the PCard Administrator immediately. The Cardholder and their Approving Official are responsible for understanding and adhering to the [PCard Policy & Procedure Handbook](#). The PCard must be used for University business only. The PCard must not be loaned to another employee. Should a Cardholder terminate employment, have a leave of separation, or extended vacation with the University, the Cardholder's department is obligated to reclaim the PCard and return it to the PCard Administrator prior to the Cardholder's termination and/or leave date.

CARDHOLDER AGREEMENT:

As holder of a PCard, I agree to accept the responsibility for the protections and proper use of this card as disclosed above and in the PCard Policy and Procedure Handbook. I understand that the PCard is not to be used for the following types of purchases:

- Personal items that are not purchased on behalf of or for the use by the University.
- On-site services and repairs (with limited exceptions as specified in the PCard Policy)
- Equipment over \$500 or Capital purchases (items over \$5000) - unless a Campus Marketplace exception in the PCard Policy
- Electronics costing less than \$500 that can hold sensitive data (iPads, tablets, computers, SD cards, docking stations, etc.)
- Travel & Entertainment related purchases & expenses (e.g., airlines, auto rentals, taxi, hotel, restaurants, theater, fuel, cash advances/travelers check, etc.) The PCard can be used for conference registration fees.
- Firearms, explosives, radioactive materials, controlled substances.
- Food and drink, alcoholic beverages, gifts, gift certificates, gift cards, flowers and parties unless they are in accordance with the [University Hospitality Policy](#) and [Campus Food Policy](#)
- Transactions that circumvent established controls, such as purchasing for other departments or splitting charges.
- Cash advances/Travelers checks
- Construction & construction related expenses, minor or major capital outlay as well as architect & engineering services. For certain services and repairs, refer to PCard Policy and Procedure Handbook for allowable transactions.
- Printing, copying and related services (these must go through the campus' Print Shop)
- Supplies available from a CSU business partner, such as through CSUBUY, Staples, Amazon

| Default Chart String | Business Unit (State, FDN) | Fund | Department | Account | Program | Project |
|----------------------|----------------------------|------|------------|---------|---------|---------|
| | | | | | | |

Transaction Limit \$

Monthly Limit \$

If level 2 transaction limits of \$5,000 & \$10,000 are selected a business justification must be included with your application

By signing below, I (Cardholder, Approving Official, and Division VP) understand that all purchases are subject to the University's policies and must be pre-approved by my departments signing authority.

CARDHOLDER:

Printed Name _____ Signature _____ Date _____

APPROVAL TO ISSUE A PCARD:

Approving Official: (Individual in department authorized for issuance of a PCard)

Printed Name _____ Signature _____

Conflict of Interest Completed: _____ Date _____

Vice President (Vice President of the division in which the cardholder is employed)

Printed Name _____ Signature _____ Date _____