

University of Wisconsin - Stevens Point Purchasing Card Agreement

Cardholder Name:	Department:
Campus Phone:	Alternate Phone:
General Ledger Department Number:	Single Transaction Limit Requested:
E-mail Address:	

I agree—

- To comply with the procurement rules and travel guidelines as outlined on the Purchasing Department web site: <http://www.uwsp.edu/admin/busaffairs/purchasing/>
- To verify the accuracy of the card statement
- To forward the properly signed p-card statement along with supporting documents to the Purchasing Department, 041W Main Building, within one month of the statement date

I understand—

- If p-card packets are not sent to Purchasing in a timely manner, my card will be restricted and my supervisor/department chair will be notified of the suspension.
- If packets are repeatedly late or missing or repeated audit violations occur, card privileges will be suspended for a period of time or revoked.
- If I allow any other individual to use the card, my department or I may be liable for any misuse and/or fraud.

If I terminate employment with the UWSP or transfer between departments, I will return the Purchasing card to the Purchasing Department prior to my termination or transfer date.

As holder of this purchasing card, I agree to accept the responsibility for the protection and proper use of this card. I understand that non-adherence to any of the above procedures will result in revocation of my cardholder privileges and may result in revocation of all my purchasing cards.

(Cardholder)	Date: _____
(Department Approval)	Date: _____
(Budget Director Approval)	Date: _____
(Purchasing Department Approval)	Date: _____