



SAN FRANCISCO STATE UNIVERSITY PROCUREMENT CARD PROGRAM AGREEMENT

Cardholder Name: _____
Department: _____
Phone Extension: _____

I accept the authority and responsibility to utilize the SFSU Procurement Card issued to me. I also agree to verify the accuracy of the billings, upon receipt of the monthly statement from the bank, and to forward the statement, along with all of the required supporting itemized receipts (including items purchased, amounts, price and vendor), and a completed Monthly Purchase Report to my Approving Official, within five (5) working days after the close of each billing cycle.

If a card is lost, I agree to notify the bank and the Procurement Card Coordinator immediately. If my card is stolen, I agree to notify the Campus Police in addition to the bank and Procurement Card Coordinator.

I understand that the Procurement Card is to be used only for purchases authorized by the University, and agree not to loan my card to another employee. I understand that I am personally liable for any misuse of the card, including any and all items which appear on the Prohibited Items List. I agree to repay the total amount determined to be misuse within 15 days of notification. If said amount is not paid within 15 days, I understand that my obligation may be referred for collection.

If I leave the department which authorized my Procurement Card, or if I terminate my employment with San Francisco State University, I agree to return my Procurement Card to my Approving Official, prior to my termination date.

I understand that any misuse of the Procurement Card may result in the immediate revocation of Procurement Card privileges, and that I will be held personally liable for such misuse as set forth above.

I have read, understand and agree to the terms and conditions of the Procurement Card Program.

Cardholder Signature

Date

Approving Official Signature

Date

Procurement Card Coordinator Signature

Date