

KANSAS STATE UNIVERSITY
Cardholder Agreement

Cardholder Name: _____

Cardholder agrees to accept responsibility for the protection and proper use of the Business Procurement Card (BPC) in accordance with the terms and conditions below.

Please read and initial on each line.

- _____ Only the person whose name appears on the card shall use the card. Allowing another individual to use the card for any reason constitutes improper use.
- _____ Purchases that are paid with funds other than State or Grant funds will result in a violation notice. The BPC is not to be used as a pass-through for funds such as Foundation or personal funds.
- _____ Cardholder agrees to provide the supporting receipts from the vendor and a transaction log for each transaction as designated by the BPC Coordinator under the agency policies and procedures. Failure to report or document any purchase may be deemed an improper use of the BPC.
- _____ Cardholder understands that lodging expenses are allowed on the Enhanced Lodging card. However, rates exceeding the allowable State of Kansas rates and/or does not qualify for Actual Conference Lodging will be a considered misuse of the BPC and will result in a violation.
- _____ If the card is lost, stolen or has potential fraud on it, Cardholder shall notify the BPC Coordinator immediately.
- _____ Cardholder's agency shall be responsible for all charges, including fees and interest, incurred from the proper use of the Card.
- _____ **THE CARDHOLDER MAY NOT MAKE PERSONAL PURCHASES ON THE CARD.** Cardholder understands that he/she shall be personally liable for any improper use of the BPC and agrees to pay to the issuer of the card such use (such issuer shall be a third party beneficiary under this agreement), other than improper use as the result of a lost or stolen card which was immediately reported as required in paragraph 2, including fees and interest assessed against the improper purchase. Cardholder understands that his/her improper use of the BPC may be cause for disciplinary action by the Agency including termination and that improper use of the BPC may subject Cardholder to criminal prosecution. *Cardholder understands that Agency may withhold amounts attributable to improper use by Cardholder from any paycheck or other state of Kansas warrant which may be payable to Cardholder.*
- _____ Cardholder understands that should his/her employment with Agency terminate for any reason, the BPC must be returned to the BPC Coordinator. Cardholder understands that Agency may withhold his/her final paycheck until the BPC is returned. Cardholder also understands that Agency may withdraw authorization to use the BPC and require the return of the BPC at any time for any reason.
- _____ If in doubt that a purchase is authorized under this agreement through the use of the BPC, Cardholder understands that he/she should seek prior approval from the BPC Coordinator. Such approval assumes proper use of the BPC.
- _____ Cardholder understands that use of the BPC is subject to individual card limitations on expenditures for use in official State business. All purchases must comply with State accounting and purchasing statutes, regulations and policies including all policies the Cardholder's Agency implements in the use of the Card. Items on State contracts may be acquired from the contract vendor with the BPC. The following items may **not** be purchased with the BPC, however, the list is not all inclusive:

Alcoholic Beverages	Tobacco Products	Cash Advances
Construction, Renovation or Installation	Weapons, Ammunition	Personal Items
Meals while in travel status	Gift Cards	Real Estate Leases
Printed Materials (not including books)	Sales Tax (tax-exempt States)	
Purchases involving trade-in of University Property	Food (some exceptions apply)	

Cardholder acknowledges by his/her signature to this agreement, that he/she has received training in the proper use of the card; has received, read and understands the Agency's Business Procurement Card Manual; and has read and understands this agreement.

Cardholder signature: _____ Date: _____

ID Check Completed_____