



Employee Purchasing Card Agreement

I, (employee name) _____, hereby request a purchasing card to perform work for Illinois Wesleyan University. As a cardholder I agree to comply with the Purchasing Card Policy and Procedures and with the following terms regarding my use of the card.

- I have read a copy of the Purchasing Card Policy and Procedures and I understand my responsibilities and requirements as a cardholder and agree to comply with all terms and conditions to which I am responsible under the University's Policies.
- I understand that I am responsible for proper use, management, and timely reporting as specified in the Purchasing Card Policy and Procedures.
- I agree to specify to the merchant that the transaction is tax-exempt. I understand that should I fail to do and if any sales tax is assessed, I may be responsible for repayment of the tax amount.
- I agree that misuse or abuse of the Purchasing Card will result in revocation of the card and appropriate disciplinary action which may include termination. Policy violations include, but are not limited to:
 - a. Purchasing items for personal use;
 - b. Exceeding Card limit;
 - c. Failure to return the Purchasing Card when reassigned, relocated, or transferred;
 - d. Failure to submit proper documentation with each monthly statement.
- I agree to return the Card immediately upon request or upon termination of employment.
- If the card is lost, stolen or the number has been compromised, I agree to notify Commerce Bank at 1-800-892-7104 immediately and notify the Business Office at 309-556-3158. I am responsible for any charges made from the time the card is lost until the card is reported lost.

Cardholder (print)

Cardholder signature

Date

Purchasing Card Program Administrator

Date