

JSD PURCHASING CARD APPLICATION/AGREEMENT

TO ADD NEW ACCOUNT

Complete all fields marked with a

TO UPDATE AN EXISTING ACCOUNT

Complete only the field needing updating and submit to Purchasing.

CARD INFORMATION

Personal Information

Legal Last Name – up to 20 characters (Embossed on card)

Legal First Name – up to 12 characters

Legal Middle Name

XXX – XX - _____
Last 4-digits of Employee SSN

____/____/_____
Date of Birth
(MM/DD/YYYY)

Home Street Address

City, State, Zip Code

Jordan School District Information

School or Department

Address

City Zip Code

(____) _____
Work Telephone

(____) _____
Cellular Telephone

E-mail Address

Default Accounting Code

\$ _____
Default monthly credit Limit

\$ _____
Default single transaction Limit

AUTHORIZATION

Employee Signature

Date

*Please read and review the back of
this form before signing*

Supervisor's Signature

Date

**(FOR PURCHASING
DEPARTMENT USE ONLY)**

Kurt A Prusse – Director of Purchasing

Date approved

Date entered in AccessOnline

Date card received from bank

Date card sent to card holder

JSD PURCHASING CARD APPLICATION/AGREEMENT

Cardholder Agreement Form

The U.S. Bank Visa® Purchasing Card represents Jordan School District's trust in you. You are empowered as a responsible agent to safeguard the District's funds. Your signature on the front of this form is verification that you have read the District's policies and procedures and agree to comply with them as well as the following responsibilities:

1. I understand the card is for school district approved purchases only, and I agree not to charge the card for personal purchases.
2. Improper use of this card can be considered as misappropriation of District funds. This may result in disciplinary action up to and including termination of employment and prosecution to the fullest extent of the law allowed.
3. I agree not to split a purchase to avoid the single purchase limit of \$5,000. I understand that if I do so my Purchasing Card privileges may be revoked or I may be suspended from use of the card for a period of time.
4. If the card is lost or stolen, I will immediately notify U.S. Bank by telephone (1.800.344.5659) and I will also notify by email the Purchasing Card Program Administrator.
5. I agree to surrender the card immediately upon request.
6. The card is issued in my name. I will not allow any other person to use the card. I am considered responsible for any and all charges against the card or to report any suspected or potential fraudulent charges to US Bank immediately.
7. All charges will be billed directly to and paid by the Accounting Department at the District Office.
8. As the card is Jordan School District property, I understand that I will be required to comply with internal control procedures designed to protect District assets. This may include being asked to produce the card to validate its existence and account number. I will produce a monthly log and attach receipts for all purchases to document use.
9. I will complete and submit monthly reconciliation paperwork prior to the 19th of every month (if the card has been used during the previous billing cycle), including original receipts, which will report all activity during the statement period. Since I am responsible for all charges on the card, I am responsible to resolve any and all discrepancies in a timely manner as outlined in the Policies and Procedures Manual.
10. I understand the Purchasing Card is not necessarily provided to all employees. Assignment is based on my need to purchase materials for Jordan School District related business only. My card may be revoked based on change of assignment or location. I understand that the card is not an entitlement nor reflective of title or position.