Virginia Commonwealth University

CORPORATE PURCHASING CARD
EMPLOYEE AGREEMENT

I, _____, (***print name as it should appear on card***) hereby request a Corporate Purchasing Card. As a Card member, I agree to comply with the following terms and conditions regarding my use of the Card:

1. I understand that I am being entrusted with a valuable purchasing tool and will be making financial commitments on behalf of my agency and will strive to obtain the best value for the University. Additionally, I understand that the cardholder and department are subject to post-audit review of transactions to ensure compliance with applicable procedures.
2. I understand that my agency is liable to card provider for all charges made on the Card.
3. I agree to use the Card for approved business purchases **only** and agree not to charge personal purchases even though I may intend to repay them. I understand that charging any personal purchase to this card could be treated as embezzlement. I understand that my agency will review the use of this Card and the related management reports and take appropriate action on any discrepancies. See compliance.
4. I will follow the established procedures for the use of the Card including use of eVA and required training. In addition, I expressly agree to not share my card or card number with anyone other than a vendor I am doing business with. Failure to do so may result in either revocation of my privileges and/or other disciplinary actions, including termination of employment.
5. I agree to return the Card immediately upon request or upon termination of employment (including retirement). Should there be any organizational change that causes my index code to change, I also agree to return my Card and arrange for a new one, if appropriate.
6. If the Card is lost or stolen, I agree to notify the Program Administrator and the card provider immediately.

By signing below, cardholder & supervisor acknowledge cardholder's responsibility to reconcile the Department Transaction Report, which requires timely review & approval by the Reviewer. By signing the next page, the Reviewer acknowledges the Reviewer responsibilities attached.

_____
Employee's Signature Date

Date of Birth: _____

**Home
ORG code: _____

Dept
Name: _____

Phone #: _____

P.O. Box #: _____

E-mail: _____

Dept Index: _____

☐ **Standard P-Card:**
$2,500 transaction/$5,000 month

AND/OR

☐ **Air and Rail Card only (eVA exempt):**
$2,500 transaction/$5,000 month (domestic)

OR

☐ $10,000 transaction/$15,000 month (international)

Indicate below if lower or higher limits are needed:

$_____ /transaction $ _____ /month

_____
Supervisor's Name Printed

_____
Supervisor's Signature Date

****http://www.hr.vcu.edu/pdf_docs/HRS_Dept_to_Banner_ORG_General_Release.xls**

RETURN FORM VIA ONE OF THE FOLLOWING:
Fax: 804-828-3360
Mail: PO Box 980616
Attn: Program Administrator
Scan: corpcard@vcu.edu

Approved by Program Administrator:

REVIEWER RESPONSIBILITIES

The Reviewer plays a critical role in the reconciliation process and must follow the guidelines below:

Monthly

- Verify all purchases made are valid business expenses and comply with policies and procedures;
- Carefully review the Department Transaction Report and supporting documentation to verify amounts match;
- Ensure all receipts are original receipts and vigorously question any receipt which does not appear in all respects to be an original receipt;
- Confirm state sales tax has not been paid. If paid, have cardholder contact vendor for refund and document the reconciliation accordingly;
- Verify transactions were not processed separately (split) to circumvent established limits;
- Report noncompliance to Corporate Card Administration Team at corpcard@vcu.edu;
- Review the system generated Department Transaction Report and sign off electronically each month before the next cycle closes (approximately the 15th of each month). Failure to review cardholder's reconciliations timely could result in loss of cardholder's P-card privileges and eVA access;
- Understand that by signing off online the reviewer is acknowledging that he/she has seen the items and can verify receipt. If the reviewer did not see the items, then supporting documentation such as an email from someone other than the cardholder must be obtained;
- Retain all file documentation after approval (paper documentation or image/scans). Make certain, if scanned, documents are clearly legible and not altered. If documentation is imaged/scanned, ensure that the cardholder has no access to destroy or modify the imaged documentation once it has been scanned. A best practice would be ensuring all electronic images are properly backed up in the event of a hard disc crash. **All supporting documentation (e.g. original packing slips, original receipts, etc.) must be retained by the reviewer for the current fiscal year plus three additional fiscal years.** These records are subject to review by University officials and auditors; and
- Reconcile the account in Banner and confirm the charges on the statement match the charges in Banner.

As Needed

- Take the mandatory training;
- Notify the Corporate Card Administrator immediately of any potential fraud;
- Monitor transaction/credit limits for appropriateness;
- Send an e-mail to the Corporate Card Administration Team at corpcard@vcu.edu for:
    - Name changes
    - Changes to the accounting information (i.e. index number)
    - Request to increase/decrease on transaction/monthly limits
- Notify the Corporate Card Administration Team at corpcard@vcu.edu to cancel the card if a cardholder transfers to another department or leaves the University. The supervisor should ensure the card is destroyed;
- Resources: Bank of America WORKS - https://payment2.works.com

  Office of Procurement Services - http://procurement.vcu.edu/i-want-to/use-p-card/

Name of Cardholder: _____

Name of Reviewer: _____

Signature of Reviewer: _____

Date: _____