

BARBERS HILL ISD

EMPLOYEE TRAVEL CARD AGREEMENT

I, _____, hereby request a Barbers Hill ISD Travel Card. As a cardholder, I have read, understand and agree to comply with the policies and procedures in the Barbers Hill ISD Travel Card Manual. I fully understand that misuse or abuse of the travel card may result in revocation of the card and appropriate disciplinary action, up to and including termination of my employment.

_____ I agree to use this card for official approved school related hotel lodging and hotel parking expenses only.

_____ I agree that I will not use this card to pay for unauthorized travel expenses, such as:

- state hotel taxes for lodging within the state of Texas,
- meals and tips, or
- any other expense prohibited in the district's travel card guidelines.

_____ I agree that I will not use this card to pay for personal expenses such as alcoholic beverages, expenses for family members, entertainment, or my personal travel expenses before or after the official travel dates.

_____ I agree to submit the travel card to the appropriate budget manager or designee upon return from my business travel.

_____ I agree to submit proper documentation (detailed original receipts) to the budget manager or designee within 5 days after returning from my business travel.

_____ I agree that if the travel card is lost or stolen, I will immediately notify Citibank (1-800-248-4553) and the Barbers Hill ISD Program Administrator (Chelsea McDaniel @ cmcdaniel@bhisd.net) verbally and in writing.

Employee Signature

Campus/Department

Date

Budget Manager or Secretary

Date

Travel Card Number (last 4 digits):

Purchase Order #: