

GOLDENDALE SCHOOL DISTRICT #404

CHARGE CARD CARDHOLDER AGREEMENT

I understand that Goldendale School District has authorized my use of a District credit card for Authorized business expenditures on its behalf. In accepting and/or using the card, I agree to be bound by the terms and conditions as noted below.

1. I will not use the card for personal use or for any non-district purposes.
2. I will ensure purchases are properly authorized and in compliance with federal, state, and local procurement laws by ensuring there is an approved purchase order in place prior to making a purchase. Cardholders are expected to comply with internal control procedures in order to protect the District's assets.
3. I will use the card issued to me only for the payments of authorized expenses on behalf of my Building/Department.
4. I will not use the card to obtain cash advances
5. I will not allow use by an unauthorized individual.
6. The card is for business related purchases only. I understand the card shall not be used for the following: salaries or wages, gifts (including flowers or gift certificates), donations to charity, alcoholic beverages, illegal items, or personal services.
7. I understand that I will be responsible for the submission of all itemized credit card invoices and receipts along with the card to Building/Department Office staff to ensure proper card security measures. Any charges not properly identified on the expense voucher, or not allowed following review by the auditing officer, will be paid by the administrative staff member.
8. If I have a card issued in my name, I will surrender the card to the Director of Business Operations in the event of my transfer, separation of service from the District, or recall of card by the District. At this point, no further use of the card is authorized.
9. I will immediately report any stolen or lost card to the Director of Business Operations.
10. I understand that improper use of the card can be considered misappropriation of funds which may result in disciplinary action up to and including termination.



Policy No. 6212
Management Support

Adoption Date: 6/02/16
Revised: 11/21/16

I HAVE READ AND UNDERSTAND THE ABOVE CONDITIONS:

Employee Printed Name

Employee Signature

Date