

PURCHASING CARD (PCARD) REQUEST AND AGREEMENT

For Purchasing Department Use ONLY
Limit per Transaction: \$ _____
Limit per Month: \$ _____

Directions:

- Employee should complete section 1, sign below and email request form to their Direct Manager.
- Manager with budget authority should complete section 2, sign the form, and email completed request to pcard@madisoncollege.edu

Once your request is processed, you will receive an email with the training information.

Section I – Employee

Cardholder Legal Name <i>(please print)</i> :	Cardholder Date of Birth <i>(mm/dd/yy)</i> :	Last 4 digits of Cardholder’s Social Security Number:
Cardholder’s College Employee Number (OneCard #):	Division/Department:	Campus Location:
Cardholder Phone Number: () - -	Budget Manager <i>(please print)</i> :	
Email address:		

Section 2 – Program Budget Manager

WORKTAG TO BE ASSIGNED AS DEFAULT:

Spend Category:	Fund:	Cost Center:	Program:	Location:	"Other Worktag":
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Terms and Conditions:

I understand that I will be making financial commitments on behalf of Madison Area Technical College District (Madison College), and will strive to obtain the best value for Madison College. I understand that there are specified items that may not be purchased using this purchasing card and agree to follow purchasing procedures to obtain such items. I understand that failure to do so may result in a suspension of purchasing card privileges.

I understand that only I can use my Madison College purchasing card and will not authorize purchases made in absence of my presence.

I agree, upon receipt of merchandise from a vendor, to verify the accuracy of the transaction and attain supporting receipts. The receipts are to be descriptive documentation from the vendor including items purchased, quantity and price.

I understand that purchasing cards are made available to any Madison College full-time employee with authorization from their Budget Manager and approval from the Vice President of their area, that purchasing cards are not made available to Madison College Student Clubs, and that I cannot use my Madison College purchasing card for travel-related expenses.

I understand that as a holder of a Madison College issued purchasing card, I am responsible to adhere to all Madison College Procurement and Purchasing Policies.

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Since I am responsible for all charges (but not for payment) on the purchasing card, I will reconcile the statement transactions in Workday and resolve any discrepancies by either contacting the vendor or U.S. Bank. I will make certain I have receipts for all transactions on my statement. If a vendor did not supply receipts, I will contact the vendor and request one or attach a statement explaining why a receipt was not obtained for the items that were purchased.

I agree to review/submit my purchasing card transactions at least weekly, and reconcile transactions twice or more a month via Workday's Verify Procurement Card Transaction process. I understand that my Purchasing Card privileges will be suspended if I fail to turn in my reconciled statement within 31 days of transaction date. I understand that I will be notified once my statement is 15 days overdue and may not be notified when it is 31 days overdue and card is suspended. I understand that reinstatement of privileges will occur when Purchasing receives all outstanding statements. I understand that privileges can be permanently revoked after the third suspension. I understand that Madison College may use payroll deduction to recover any unsubstantiated charges on statements that are over 60 days overdue. I also understand that if payroll deduction is initiated, I will lose my credit card privileges.

I understand that it is my responsibility to make appropriate worktag changes for transactions using Workday's Verify Procurement Card Transaction process. I agree to make such changes within the designated time frame.

If a purchasing card is lost or stolen, it is my responsibility to notify both pcard@madisoncollege.edu and U.S. Bank Customer Service (1-800-344-5696) immediately.

Should I terminate employment with Madison College, it is my obligation to give my purchasing card to my Manager prior to my termination date. As a cardholder, I agree to surrender the purchasing card immediately upon termination of employment, whether for retirement, voluntary, or involuntary reasons. I also agree to complete any outstanding reallocation and/or documentation or make other arrangements to have such reallocation and/or documentation completed for me. If transferring and no longer needing the purchasing card, I will notify pcard@madisoncolleg.edu for cancellation purposes.

The purchasing card is Madison College property and I understand that, periodically, I may be required to comply with internal control procedures designed to protect Madison College assets. This may include being asked to produce the purchasing card to validate its existence and account number or responding to request for information about specific charges.

As holder of this purchasing card, I agree to accept responsibility for the protections and proper use of the purchasing card as enumerated in the Purchasing Card Manual. I understand that under no circumstances will I use the purchasing card to purchase Madison College restricted items or make personal purchases, whether for myself or for others. I understand use of the purchasing card for personal purchases is a violation of State law and that I would be subject to prosecution. I agree that should I violate the terms of this Agreement and use the Madison College purchasing card for personal use or gain, I will reimburse Madison College for all incurred charges and any fees related to the collection of those charges.

I have read and will follow all Madison College Procurement Card Policies and Procedures as outlined in the Purchasing Card Program Manual. I understand that failure to adhere to Madison College Procurement Card Policies and Procedures may be considered misappropriation of Madison College funds and may result in revocation of individual cardholder privileges or other disciplinary action, up to and including termination of employment.

Signature: _____
(Cardholder)

Date: _____

Signature: _____
(Manager with Budget Authority)

Date: _____