Chinook's Edge School Division No. 73
Purchasing Card Employee Agreement

Between: **The Board of Trustees of Chinook's Edge School Division No. 73**
(Hereinafter called "The Division" Of the First Part)

And: _____
(print name)
(Hereinafter called "The Cardholder" Of the Second Part)

WHEREAS The Purchasing Card represents the Division's trust in you, you (the cardholder) are empowered as a responsible agent to safeguard Division assets. Your signature on this Agreement is a verification that you **have read and agree to comply with** the contents of this document.

1. I understand the purchasing card is for Division approved purchases only, and I agree not to charge purchases outside the parameters described in the Division Administrative Procedure AP 5-10 Purchasing Procedures. _____ **Initial**
2. I understand I am responsible for the security of the purchasing card and the transactions made against it. The purchasing card is embossed with my name and I am the **only** individual to use it. _____ **Initial**
3. I understand that the purchasing card **will not** be used for personal purchases. _____ **Initial**
4. I understand the improper use of the purchasing card will be considered misappropriation of Division funds and could result in disciplinary and/or legal action, up to and including termination of employment. _____**Initial**
5. I understand all purchases are in effect pre-approved by the principal/department manager. If in doubt I will get a verbal or e-mail approval prior to purchase.
6. I agree to never instruct, or knowingly allow a merchant to split a transaction that is higher than my single transaction limit approved on the Purchasing card application.
7. I understand that receipts must be obtained for each purchase. Original receipts will be attached to the purchasing card transaction log which must be reconciled monthly.
8. I understand that if for some reason I do not have receipts, I must attach a description of purchase using the Missing Receipt Documentation Form, and that continued incidents of missing receipts or supporting documents may result in the cancellation of the purchasing card.
9. I understand that if my purchasing card is lost or stolen I must contact US Bank and the Division Plan Administrator by phone or e-mail immediately.
10. I understand that upon cessation of employment, or if requested to do so by my principal/department manager, I will return my purchasing card and all original purchase receipts to my principal/department manager.

_____ _____
EMPLOYEE SIGNATURE **BOARD REPRESENTATIVE**

_____ _____
WITNESS **DATE**

_____
SCHOOL/LOCATION

To be submitted with completed Purchasing Card Program Application