

DEPARTMENT OF ADMINISTRATION

Division: _____

Employee Agreement for Procurement Card

I, _____ (employee name), hereby acknowledge being issued a Procurement Card. As the holder of this Card, I agree to comply with the following terms and conditions regarding my use of the Card.

- I understand that I am being entrusted with property of the State of North Carolina--a Purchasing Card--with which I will be making financial commitments on behalf of the State of North Carolina, Department of Administration.
- **I understand that I am the only authorized cardholder and no other person is authorized to use my card.**
- I understand that the State is liable to BANK OF AMERICA for all charges made on the Card.
- I agree to use this Card for approved division business purchases only and agree not to use it for personal purchases under any circumstances. I understand that there will be audits of the monthly statements regarding this Card and that appropriate action will be taken by management in the event of Card misuse.
- I will follow the established procedures for the use of the Card. Failure to do so or any misuse of the Card may result in revocation of my use privileges and/or disciplinary action(s) up to and including possible dismissal, in accordance with disciplinary policies of the Department of Administration and the Office of State Personnel.
- I have been given a copy of the Procurement Card Policy & Procedures and understand the requirements for Card use.
- I agree to return the Procurement Card immediately upon request or separation from employment (including termination, transfer, resignation or retirement).
- If the Card is lost or stolen, I agree immediately to notify BANK OF AMERICA and the DOA Procurement Card Administrator.
- I am aware of my responsibility for reporting any misuse of this Card.

EMPLOYEE SIGNATURE

DATE

cc: Personnel File
Purchasing Card Administrator