

# Purchasing Department Procurement Card Card Holder Agreement

Procurement Card Number \_\_\_\_\_

Date Received \_\_\_\_\_

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I, \_\_\_\_\_, acknowledge receipt of the abovementioned Procurement Card, and accept the Card under the following conditions:

- I am responsible for this ProCard, and shall ensure that this card is only used for the official business of the Seattle Community Colleges. I understand that the use of this card for personal purchases may constitute fraud and could be cause for serious disciplinary action.
- I agree to abide by rules and procedures established by the Washington state, the Purchasing Department as well as any College Campus or departmental internal procedures.
- I understand that this card cannot be used *to purchase* any item costing more than \$2,500 (including shipping charges and taxes) unless the Purchasing Department has pre-approved an exception due to special circumstances.
- I guarantee that:
  - ✚ I shall obtain receipt for every purchase and keep the records in a file folder (online or printed document) available for audit purposes;
  - ✚ I reconcile the charges online on a monthly basis; and
  - ✚ I report unauthorized charges on this Card immediately to the Card Provider and inform the Purchasing Department by emailing: [procard@seattlecolleges.edu](mailto:procard@seattlecolleges.edu).
- I shall surrender this Card upon termination of my employment at Seattle Community Colleges OR when the use of the Card is no longer necessary.
- I agree that I have received a copy of the general guidelines for the use of ProCard.
- I shall abide by all the restrictions related to the Procurement Cards at the Seattle Community Colleges.

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## Card Holder

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Department: \_\_\_\_\_ Email/Tel No: \_\_\_\_\_

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## Card Holder's Manager

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Department: \_\_\_\_\_ Email/Tel No: \_\_\_\_\_

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*Note: Please complete this agreement and forward to the Purchasing Department, MS 1DO-100.*