**District Form**

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**Toppenish School District**

# TOPPENISH SCHOOL DISTRICT PURCHASING CARD PROGRAM INDIVIDUAL CARDHOLDER USER AGREEMENT

**Section #1 - CardHolder**:

I understand that the Toppenish School District has a prior lien against and a right to withhold any and all funds payable or to become payable by the District to me up to the amount of unauthorized and/or unapproved purchases plus interest, in case of default, until such time a repayment or justification has been made. I further understand that any unauthorized/unapproved purchases shall be considered a misappropriation of the District funds and may result in the revocation of card privileges and possible disciplinary actions. I acknowledge that I have read and understand the reverse side to this agreement - Conditions of Use.

Signature Date

Printed Name and Title School/Department

Telephone Number e-mail address

**Section #2 - Approving Department/School Administrator:**

Single Transaction Limit Purpose of Use

(Not to exceed $XXX)

Budget Number Date

Principal/Administrator

**Section #3 - District Purchasing Card Administrator Approval:**

Purchasing Card Administrator Signature Date

**Section #4 - District CardHolder Receipt of Purchasing Card:**

CARD NUMBER: Date Received:

Card received by: CardHolder Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**TOPPENISH SCHOOL DISTRICT #202 CONDITIONS OF USE**

I understand the Toppenish School District No. 202 has authorized my use of a district purchasing 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 that follow:

* I will use the card issued to me only for the payment of authorized expenses on behalf of my

school or department, which may include supplies, instructional materials, equipment, subscriptions, and registrations. The card may be revoked at any time based on change of assignment within the district.

* I will not use the card to obtain cash advances.
* I will not allow usage by any other individuals.
* I will not use the card for personal use or for any non-district purpose.
* I understand that the card shall not be used for the following: salaries/wages, gifts (including

flowers and meals for employees), donations to charity, personal services, travel (unless prior authorization has been received), and contracts for services.

* I understand that I will be responsible for keeping all receipts and I will surrender the

 card to the program administrator with original receipts when purchase for the

 purpose of this use is complete. **FAILURE TO TURN IN RECEIPTS WILL RESULT IN A DEDUCTION FROM YOUR PAYCHECK, DURING THE NEXT PAYROLL RUN, FOR THE AMOUNT OF THE RECEIPT(S) NOT TURNED IN.**

* I will immediately report any stolen or lost card to the bank card company at 1-888-449-2273 and the

Business Manager (ext. 8145).

* I understand that any charges against the purchasing card that are not properly identified or not allowed by the district shall be paid by the employee incurring the charges. They will be paid by check, United States currency, or **salary deduction**. I further understand, in compliance with RCW 42.24.115, that any disallowed charges which are not repaid before the purchasing card billing is due and payable allows the district to place a lien against and have a right to withhold any and all funds payable to me up to the amount of the disallowed charges plus interest at the same rate as charged by the purchasing card company until the charges are paid. I further understand that any employee who has been issued a card shall not use the card if any disallowed charges are outstanding and shall surrender the card upon demand of the superintendent or designee.
* I understand that any variance and/or violation of the above conditions will result in cancellation.

Misuse of the card could result in discipline and/or personal liability for the dishonored charges.

* Any district purchasing card use is subject to examination by the state auditor's office.
* The district shall have unlimited authority to revoke use of any purchasing cards issued and upon such revocation shall not be liable to any cost subsequently charged to the purchasing card.

# I certify by my signature on the Individual Cardholder Conditions of Use that I understand the Toppenish School District purchasing card guidelines and agree to comply with them.

Signature Title/Location

Print NameCredit

Date Form Revised 06/08/2017