



# PURCHASING CARD APPLICATION, AGREEMENT AND LOG

Completing BOTH SIDES of this application means that you have read, understand and agree to the terms and conditions identified in the Purchasing Procedures document and that you have signed the *Employee Agreement to Accept the Purchasing Card Privileges and Responsibilities*.

## CARD INFORMATION

## AUTHORIZATION

\_\_\_\_\_  
 First Name - 12 characters  
(Embossed on card)

\_\_\_\_\_  
 Middle Initial - 1 character  
(Embossed on card)

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\_\_\_\_\_  
 Last Name - 20 characters  
(Embossed on card)

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\_\_\_\_\_  
 Email Address  
(Required)

\_\_\_\_\_  
Flathead Valley Community College  
 Agency Name - 19 characters  
(User definable - embossed below cardholder name on plastic)

\_\_\_\_\_  
777 Grandview Drive  
 Address - 36 characters

\_\_\_\_\_  
Kalispell  
 City - 25 characters

\_\_\_\_\_  
MT                      59901  
 State - 2 characters              Zip - 5 characters

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\_\_\_\_\_  
 Monthly Credit Limit - 6 characters  
(If left blank defaults to \$3,000)

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\_\_\_\_\_  
 Home Phone - 10 characters

\_\_\_\_\_  
 Business Phone - 10 characters

\_\_\_\_\_  
 Employee Signature

\_\_\_\_\_  
 Date

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\_\_\_\_\_  
 Supervisor Name & Signature

\_\_\_\_\_  
 Date

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\_\_\_\_\_  
 Executive Team Member Name & Signature

\_\_\_\_\_  
 Date

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\_\_\_\_\_  
 Vice President / CFO Christiaens

\_\_\_\_\_  
 Date

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\_\_\_\_\_  
 President Karas

\_\_\_\_\_  
 Date

## PLANNED USES:

- |                 |                         |
|-----------------|-------------------------|
| Travel          | Supplies                |
| Membership Dues | Conference Registration |
| Airline Travel  | Lodging                 |

## EMPLOYEE AGREEMENT TO ACCEPT THE PURCHASING CARD PRIVILEGES AND RESPONSIBILITIES

This purchasing card represents FVCC's trust in you. You are empowered as a responsible agent to safeguard FVCC's assets. Your signature below is verification that you have read the Purchasing Procedures and agree to comply with it as well as the following responsibilities:

1. I understand the card is for FVCC-approved purchases only, and I agree not to charge personal purchases.
2. I will follow the established procedures for using the Purchasing Card. Improper use of this card can be considered misappropriation of FVCC funds. This may result in disciplinary actions, including termination of employment, criminal action or civil liability.

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3. If the card is lost or stolen, I will notify the Business Office immediately.
4. I agree to surrender the card immediately upon termination of employment, whether for retirement, voluntary or involuntary reasons.
5. The card is issued in my name. I will not allow any other person to use the card. I am considered responsible for any and all charges against the card.
6. All charges will be billed directly to and paid directly by FVCC. The bank cannot accept any monies from me directly; therefore, any personal charges billed to this card could be considered misappropriation of FVCC funds.
7. As the card is FVCC property, I understand that I may be periodically required to comply with internal control procedures designed to protect FVCC assets. This may include being asked to produce the card to validate its existence and account number. In addition to receipts, I may also be asked to produce additional supporting evidence.
8. I will complete a Purchasing Log with all of the activity during the statement period. Since I am responsible for all charges on the card, I will resolve any discrepancies by either contacting the supplier or the Business Office. I understand that I am required to submit original, detailed supporting documentation for all purchases. Original receipts are required. If original documentation is impossible to gather, a statement from the purchaser must be attached with a personal statement ensuring that the *Check Request* is not a duplicate submission. Documentation must include vendor name, date of purchase and complete list of items purchased. Hand written receipts cannot be accepted. Account codes must be included in the submission. Check requests, the Purchasing Log, the purchasing card statement and all supporting documentation must be turned in by the monthly cutoff date.
9. I understand the Purchasing Card is not necessarily provided to all employees. Assignment is based on my need to make purchases for FVCC. My card may be revoked based on change of assignment or location. I understand that the card is not an entitlement nor reflective of title or position.
10. Base requirements for eligibility of a Purchasing Card:
  - Active permanent FVCC employment status, excluding temporary and students
  - Responsible for making purchases in the capacity of employment
  - All card limits will be set by the applicant's relevant Executive Officer, not to exceed \$3,000, unless budget authority and job responsibilities justify a different amount and it is approved by the supervisor, relevant Executive Team member, Vice President/CFO and President

Failure to follow the Purchasing Card procedures and Employee Agreement will result in suspension of cardholder privileges, possible cancellation of Purchasing Card and/or further personnel action.

Communication about misuse or possible revocation of privileges will be in the form of a memo from the Vice President / CFO of Administration and Finance, with a copy to the supervisor and Executive Team member.

EMPLOYEE Printed Name & Signature \_\_\_\_\_ Date \_\_\_\_\_

SUPERVISOR Printed Name & Signature \_\_\_\_\_ Date \_\_\_\_\_

# PURCHASING CARD APPLICATION, AGREEMENT AND LOG

Purchasing Card MONTHLY Transaction Log >>

FOR CYCLE ENDING: \_\_\_\_\_

CARDHOLDER NAME:	TODAY'S DATE:	DIVISION:
LAST 4 of CARD NUMBER:	SUPERVISOR'S NAME:	

#	PURCHASE DATE	SUPPLIER	DESCRIPTION	TOTAL	ACCOUNTING CODE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					

LOG TOTAL:
STATEMENT TOTAL:

Original receipts shall be attached to this completed document. For scanning purposes, receipts taped to an 8.5" by 11" paper are ideal. One stapled packet or an envelope with receipts is also acceptable. Staple this completed document to a Check Request along with all receipts and supporting documentation by the deadline provided by the Business Office. Log total must equal purchasing card statement total.

I certify that the above expenditures were made in the capacity of my employment and for the full use and benefit of FVCC as discussed with my supervisor.

Cardholder's Signature \_\_\_\_\_ Supervisor's Signature \_\_\_\_\_