

U.S. Bank Purchasing Card Program Cardholder Application

Section I- Purchasing Card (PCard) Applicant information and Cardholder Agreement

Cardholder Information

| | | | |
|------------------------|--------------------|------------------------|-----------------------|
| Last Name: | First Name: | Middle Initial: | Last 4 of SSN: |
| Department: | MSUM Email: | | |
| MSUM Telephone: | Job Title: | | |

Cardholder Agreement: As a Minnesota State University Moorhead Purchasing Cardholder, I:

1. Accept the responsibility for the protection and proper use of the card.
2. Will review and comply with MSUM and system policies and procedures.
3. Understand the card may be used for authorized University business related purchases only.
4. Understand the PCard is for my sole use and that I may not allow any other person to use it.
5. Will strive to obtain the best value when purchasing merchandise with the PCard.
6. Agree to use the PCard only for pre-approved purchases. I agree to complete the Special Expense form before incurring purchases considered a special expense.
7. Agree to inform the vendor of the University's tax-exempt status before incurring charges.
8. Must report a lost/stolen PCard immediately.
9. Understand the University may terminate the right to use the card at any time for any reason.
10. Will complete all required PCard training.
11. Understand that improper or fraudulent use of the PCard may result in revocation of the PCard and disciplinary action, termination of employment at MSUM, criminal prosecution, as well as reimbursement for the unauthorized use of the PCard.
12. Agree to complete the reconciliation process for all PCard transactions.

I have read and agree to all statements above. By signing this application, I acknowledge the responsibilities that accompany accepting the University PCard and agree to comply with the University's policies, procedures, applicable laws, and ethical practices when using the card.

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|------------------------------|--------------|
| Cardholder Signature: | Date: |
|------------------------------|--------------|

Section II- Department Account Information

Cardholders should work with their direct supervisor to fill out Section II before forwarding this application on to your Approval Manager. Approval Managers will not always be the direct supervisor.

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| Default cost center: | |
|-----------------------------|--|

| Card Spending Limits | | Single Transaction Limit | Monthly Spending Limit |
|--------------------------------------------------------------------------|--|--------------------------|------------------------|
| This card will have the following limits: | | \$1000 | \$2500 |
| | | \$2500 | \$5000 |
| If other thresholds are desired, indicate amounts and include rationale. | | | |
| <i>Rationale:</i> | | | |

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Section III- Approval Manager signature

Approval Manager: *As the Approval Manager, I am approving the purchasing card issuance, and I agree to fulfill the requirements of an approver.*

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|-------------|--|-------|--|
| Print Name: | | | |
| Signature: | | Date: | |

Submit application to: Business Services, Owens 106 or email to purchasingcard@mnstate.edu.

Section IV – University Comptroller approval

| | | | |
|-------------|--------------|-------|--|
| Print Name: | Karen Lester | | |
| Signature: | | Date: | |

| | | |
|--------------|--|-------------------------------------------------------------|
| Internal Use | | PCard ordered |
| | | PCard is picked up and activated/training link is sent out: |
| | | Added to Listserv |
| | | Delegation of Authority is complete |
| | | Training completed within 30 days of pick up |