



# Mississippi Valley State University

## P-Cardholder Delegation Form

I, (cardholder) \_\_\_\_\_, am delegating the use of my P-Card to (delegated employee) \_\_\_\_\_ for use in procuring certain goods and services. Authorization is given for the period \_\_\_\_\_ through \_\_\_\_\_. By signing this agreement, you as (delegated employee) acknowledge that you understand and will comply with all of the Mississippi Valley State University Procurement Card guidelines, as listed below.

I, as the authorized and approved cardholder, fully understand that I am ultimately responsible for the purchases made by the delegated employee using my P-Card.

Both the delegated employee and the cardholder must sign and agree to the following terms and conditions regarding the use and safekeeping of the procurement card (P-Card):

1. I will be making financial commitments on behalf of the Mississippi Valley State University and will obtain fair and reasonable prices.
2. I have received instruction from cardholder and agree to follow all procedures established for use of the P-Card.
3. I will not use the P-Card for non Mississippi Valley State University related business, unauthorized purchases, or for personal purchases.
4. I will immediately return the P-Card, and all receipts, to the cardholder.
5. I understand that the use of the P-Card does not exempt me from purchasing requirements as set forth in Mississippi Valley State University policy and procedures and the P-Card guidelines.
6. I understand that I am personally responsible for obtaining ALL original detailed receipts (purchase and credit documents) and submitting them in accordance with University of Arkansas P-Card procedures.
7. I understand that any purchases made by me will be recorded and reviewed in management reports, to insure compliance with Purchasing and P-card guidelines.
8. I understand that failure to follow any of the above listed terms & conditions or if found to have misused the P-Card in any manner may result in:
  - Revocation of the privilege to use the P-Card
  - Disciplinary action
  - Termination of employment, and/or criminal charges being filed with the appropriate authority.

I hereby accept the above terms and conditions for delegation of the P-Card.

\_\_\_\_\_  
Delegated Employee Name

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

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Cardholder Name Printed

\_\_\_\_\_  
Cardholder Signature

\_\_\_\_\_  
Date Signed

This form must be attached to each receipt for which the delegation of the P-Card was used. Maintain copy for your records.