

# Mississippi Valley State University

## PROCUREMENT CARDHOLDER AGREEMENT

Mississippi Valley State University is pleased to present you with a Procurement Card. It represents the University's trust in you and your empowerment as a responsible employee of the University to safeguard and protect our assets.

I hereby agree to comply with the terms and conditions of this Procurement Cardholder Agreement and Procurement Card procedures.

I hereby agree to use my best effort to minimize exposures from lost, stolen, or otherwise compromised Pro-Cards. I agree to properly use the Pro-Card. I understand that the University **WILL** audit the use of the Pro-Card. I understand that **I CANNOT** use the Pro-Card for personal transactions or for any restricted purchased, even if reimbursed.

### REQUIREMENTS AND RESPONSIBILITIES

- Must be a current employee of Mississippi Valley State University
- Assure that the items purchased are required for a bona fide university purpose
- Notify the merchant that the purchase is being made in the name of a government entity, which is exempt from state and local taxes. If taxes are charged, obtain credit immediately.
- Obtain itemized receipts from vendors
- All items are received (**NO BACK ORDERS ALLOWED**)
- Purchases are within the limits set and available budget authority (single transactions must be less than \$5,000.00)
- **DO NOT SPLIT** purchases into several transactions to get around the single transaction limit of \$5,000.00.
- **DO NOT USE** the Procurement Card for **TRAVEL**. (**EXCEPTION:** Car Rentals state vendor list, and Team Travel)
- **DO NOT PURCHASE** equipment or inventory items (Without Contacting the Purchasing Department)
- **DO NOT** purchase certain services

I hereby understand that improper use of this Pro-Card may result in disciplinary and legal actions, including but not limited to restitution, forwarding information to the appropriate authorities for criminal prosecution, and possible termination of employment. Should I fail to use the Pro-Card properly, I authorize the University to deduct from my salary, or from any other amounts payable to me, and amount equal to the total of the improperly purchases. I also agree to allow the University to collect and amounts owed by me under this Agreement.

I hereby understand that the University may terminate my rights to use this Pro-Card at any time and for any reason or no reason whatsoever. I hereby agree to return the Pro-Card to the University's Procurement Card Manager or my Department's Chair or Supervisor immediately upon request from the university, when charging department, or upon terminate of employment

### CARDHOLDER:

Date: \_\_\_\_\_  
Signature – Procurement Card Applicant \_\_\_\_\_ Print Name \_\_\_\_\_

\_\_\_\_\_ Department  
Title \_\_\_\_\_

### APPROVAL ONLY:

Date: \_\_\_\_\_  
Approved \_\_\_\_\_ Print Name \_\_\_\_\_

\_\_\_\_\_ Department  
Title \_\_\_\_\_

# Mississippi Valley State University

## APPLICATION FOR PROCUREMENT CARD

### Cardholder Information

Cardholder Name \_\_\_\_\_  
First, MI, Last

MVSU ID # \_\_\_\_\_  
Date of Birth  
(MM/DD/YYYY)

### Departmental Information

Departmental Card Administrator Name \_\_\_\_\_  
First, MI, Last

Department Mailing Address \_\_\_\_\_

Office Phone \_\_\_\_\_  
Departmental Card Administrator

Departmental Mail Box \_\_\_\_\_  
Email Address

Department Name \_\_\_\_\_  
Departmental Card Administrator

Text on Card \_\_\_\_\_  
(26 Characters displayed under cardholder's name, may be department submit or project name)

Default Acct. No \_\_\_\_\_  
(Fund, Org. Program, Activity)

### Other Information

Total Number of Cards \_\_\_\_\_

### Restrictions

Please circle the selected spending limited for your card based on likely activity. Be conservative and select and lowest limits possible to reduce University risk. If you do not select a credit level and select specific spending limits then the default will be credit level 4

PLEASE NOTE: Procurement reserves the right to reduce credit limits based on transaction history.

<b><u>Approval</u></b>	<b><u>REVOKED</u></b>	<b><u>CREDIT LEVEL 1</u></b>	<b><u>CREDIT LIMIT 2</u></b>
Start Date: _____	Date: _____	Monthly Credit Limit 30,000.00	Monthly Credit Limit 20,000.00
Process Date: _____	Reason: _____	Single Transaction Limit Cannot exceed \$5,000 _____ If blank, will default to \$5,000.	Single Transaction Limit Cannot exceed \$4,000 _____ If blank, will default to \$4,000.
End Date: _____	_____	Daily Transaction Limit _____	Daily Transaction Limit _____
Card: _____	_____	Cannot exceed half of credit limit	Cannot exceed half of credit limit

**CREDIT LEVEL 3**

Monthly Credit Limit 15,000.00

Single Transaction Limit  
Cannot exceed \$3,000 \_\_\_\_\_  
If blank, will default to \$3,000.

Daily Transaction Limit \_\_\_\_\_  
Cannot exceed half of credit limit

**CREDIT LEVEL 4**

Monthly Credit Limit 10,000.00

Single Transaction Limit  
Cannot exceed \$2,500 \_\_\_\_\_  
If blank, will default to \$2,500.

Daily Transaction Limit \_\_\_\_\_  
Cannot exceed half of credit limit

**CREDIT LEVEL 5**

Monthly Credit Limit 5,000.00

Single Transaction Limit  
Cannot exceed \$1,500 \_\_\_\_\_  
If blank, will default to \$1,500.

Daily Transaction Limit \_\_\_\_\_  
Cannot exceed half of credit limit

TYPE OF CARD:  Visa  Store  Gas