UNIVERSITY OF MISSISSIPPI
PROCUREMENT CARD PROGRAM
CARDHOLDER AGREEMENT

The cardholder shall sign a statement verifying that he/she has read these minimum requirements and any additional policies or procedures established by the University and that it is understood he/she will be personally liable for any purchase that is made which is not in compliance with these procedures; and in addition to being responsible for any such charges, the cardholder may lose the privilege of using the procurement card and may face disciplinary action.

The following are the minimum requirements for use of the Small Purchase Procurement Card.

The cardholder shall:

1. Assure that the items purchased are required for bona fide University purposes.
2. Assure that the prices paid are fair and reasonable.
3. Notify the merchant that the purchase is being made in the name of a government entity which is exempt from state and local taxes.
4. Be responsible for obtaining transaction receipts from the merchant or vendor each time the Procurement Card is used and forwarding receipts and documentation to Procurement Services.
5. Assure that all items are received (no back orders allowed).
6. Assure that no state contract items are purchased.
7. Assure that purchases are **within the limits set** and available budget authority.
8. Assure that the Procurement Card is not used for travel and entertainment expenses.
9. Assure that no services are purchased with the card.
10. Assure that no cash advances are made with the card.
11. Assure that no equipment over $999.99 and those special inventory items regardless of dollar amount are purchased with the card.

The undersigned requests that a Procurement Card be issued for their department/departmental applicant. The departmental applicant has read the above agreement and the University of Mississippi Procurement Card Program User's Guide and agrees to be bound by their terms and conditions. The signature of the departmental applicant authorizes the amount of any inappropriate items purchased with the Card to be withheld from any compensation due from the University (for example, semi-monthly pay). Also, the undersigned substantiates that the Cardholder Information on the attached is correct and within their authorization to approve for use.

_____ _____
Departmental Applicant Date Departmental Card Administrator Date

Email: _____ Email: _____

Phone: _____ Phone: _____

_____
Department Head Date

Email: _____

Phone: _____