



EMPLOYEE CREDIT/PURCHASING CARD AGREEMENT

This document outlines the responsibilities I have as a holder of a Rainy River District Social Services Administration Board (RRDSSAB) **US Bank Canada** card. My signature indicates that I _____, have read and understand these responsibilities, and agree to adhere to the policies and procedures established for the program.

1. The credit/purchasing card is intended to facilitate the purchase and payment of materials and services required to conduct business.
2. I understand that the credit limit on my card is \$_____.00 and the single transaction limit is \$_____.00, therefore, I must not exceed these amounts.
3. I understand that I cannot use the card for personal purchases.
4. I understand that the charges made against my card are recorded against the appropriate GL lines. I agree to charge only those purchases consistent with the type of materials and services authorized by policy *F-4.4: Credit/purchasing cards*.
5. Unauthorized use of the card can be considered misappropriation of funds. This could result in disciplinary action as per policy *HR-3.3: Employee Conduct & Performance*.
6. I understand that the card must be surrendered upon termination of employment, whether for retirement, voluntary separation, resignation, or dismissal. I may also be requested to surrender the card for reasons not related to my own personal situation, such as reorganization.
7. I will maintain the card with appropriate security whenever and wherever I may use the card. If the card is lost or stolen, I agree to notify *US Bank Canada* and the Director of Finance & Asset Management immediately.
8. The credit/purchasing card is issued in my name. I will not allow any other person to use my card.
9. I understand that since the RRDSSAB is responsible for payment, I will be required to comply with internal control procedures designed to protect the organizations assets. This will include producing the credit/purchasing card records for audit purposes.
10. I understand that I will receive a monthly statement that will report all activity during the last cycle. I will resolve any discrepancies by contacting the supplier, as appropriate.
11. I understand that I will be required to obtain a copy of the official receipt for all purchases and reconcile them with the monthly statement prior to forwarding to finance for payment.
12. I understand that all charges will be billed directly to, and paid directly by, the RRDSSAB. I understand that *US Bank Canada* cannot accept payment from me directly.

Employee Signature

Date

Witness

Date