

Purchasing Cardholder Employee Agreement

1. I understand the purchasing card (PCard) is for business related purchases only. I agree not to charge personal purchases.
2. I understand that I am empowered as a responsible agent to safeguard the county's assets.
3. I will comply with division and countywide internal control procedures designed to protect county assets.
4. I will reconcile my transactions within the timeframe issued by my supervisor or fiscal designee after each billing cycle. If the reconciliation deadline is missed, I will comply with additional division and/or county reconciliation procedures.
5. When payment is made utilizing a PCard, sales tax shall not be paid. If sales tax is mistakenly paid, I will take action to obtain a credit to the county. If the payment of sales tax is the result of my negligence, I understand that the sales tax will be my responsibility and I may lose the privilege of using the PCard.
6. Improper use of this card may be considered misappropriation of county funds. This may result in disciplinary action, up to and including termination of employment.
7. If the card is lost, stolen, or a fraudulent charge is discovered, I will immediately notify the PCard provider (banking institution) by telephone. Additionally, I will notify my supervisor, fiscal designee, and the Program Administrator.
8. I agree to surrender the PCard immediately upon separation of employment from Salt Lake County Government, whether for voluntary or involuntary reasons. If it is decided that my position no longer requires the use of a PCard, I will surrender the card to my division fiscal designee.

The purchasing card represents the county's trust in you to purchase on behalf of county business needs. Your signature below is verification that you have (1) attended a training session, (2) read the Training Manual/Operating Standards and Policy 7035, and (3) agree to comply with the requirements and the responsibilities outlined in this agreement.

Employee Name _____ Division _____ Date _____

Employee Signature _____

Address for New PCard to be Mailed to (*may be a personal or business address*) -if applicable
