		Section 1 - Application							
Cardholder Na	me & Title	Department	Department			If indicated below, the card will be restricted to prohibit purchases in the following			
Date of Birth	Employee's Email Address	Billing Address	Phone I	Phone Number		industry categories			
					Accommodation				
Default Budget Code		City	State	State Zip Code		Car Rental Travel			
					🗌 Re	estaurant	Gas/Oil		
Dollar Limit per Transacti Dollar Limit per Month The card will be restricted for purchases from only the vendors listed below.									
As Department Head, I recommend this employee be issued a purchasing card because:									
As the employee's Department Head, I acknowledge that I am responsible to ensure that the employee abides by the above conditions. I am responsible for taking appropriate action in situations involving misuse of the Card. I am responsible for notifying the County Purchasing Card Program Administrat to cancel the card of any Cardholder if the Cardholder is terminated for any reason, or if the Cardholder transfers to another Department within the County. I am also responsible for making certain that any reports I receive are checked for accuracy.Department Head NameDate							n Administrator		
Section 2 - Review Recommended? County Finance Director									
Recommended? County Finance Director					Date				
Section 3 - Approval									
Recommended? County Administrator Date									
Yes 🗌		Date							
Yes No Section 4 - Agreement									
I acknowledge receipt of a Bank of America Visa Purchasing Card. As a cardholder, I agree to comply with the following terms and conditions regarding use of my Card.									
1. I understand that I am being entrusted with a valuable purchasing tool and will be making financial commitments on behalf of the County and will strive to obtain the best value for the County by using contracts established or approved through the County or any cooperative agreement between a governmental agencies and vendor.									
2. I understand that the County is liable to Bank of America for all authorized charges made on the Card.									
3. I agree to use my Card for approved purchases only and agree not to charge personal purchases at any time. I understand that the County will review the use of this Card and the related management reports and take appropriate action on any discrepancies.									
4. I will follow the established procedures for the use of the Card. Failure to do so may result in revocation of my privileges, disciplinary actions, criminal penalties, and liability for repayment of unauthorized charges.									
5. I agree to not share my Card or Card number with anyone other than a vendor I am doing business with. I agree if I share my Card or Card number to anyone other than a vender than a vendor I am doing business with, the County will take disciplinary action as a result.									
6. l agree	l agree to return the Card immediately upon request or upon termination of employment (including retirement).								
7. If my Ca	If my Card is lost or stolen, I agree to notify the County Program Administrator and Bank of America immediately.								
8. I agree to comply with any and all changes to the terms and conditions or policies and procedures of the County's Purchasing Card Program.									
I acknowledge that I have read, understood, and agree to abide by the requirements of the card issuer, the County's Purchasing Card Policy and Procedures, the County's Purchasing Policy, and this Agreement.									
Employee Name Si		Signature	nature			Date			
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