Town of Black Mountain

Purchasing Card Cardholder Agreement

I,_____, acknowledge that I have been issued a Town of Black Mountain Purchasing Card ("P-Card") for official Town business. I understand that use of the P-Card is a privilege, not an employee benefit or entitlement, and that I am personally responsible for ensuring it is used in accordance with the Town's Purchasing Card Policy and Administrative Procedures.

As a condition of receiving and retaining a Town Purchasing Card, I acknowledge and agree to the following:

Card Security and Custody

I understand that the Purchasing Card is issued to me individually and shall remain under my custody and control at all times. I understand that the Purchasing Card remains the property of the Town of Black Mountain and shall be surrendered immediately upon request by the Finance Officer or upon separation from employment.

I will:

- safeguard the physical Purchasing Card and card account information from unauthorized use;
- maintain physical possession of my Purchasing Card except when necessary to complete an authorized transaction.
- not allow another person to use my Purchasing Card for any purpose;
- not loan, share, transfer, or assign my Purchasing Card or account information to another individual;
- immediately notify the Finance Office if my Purchasing Card is lost, stolen, compromised, or suspected of unauthorized use.

Authorized Use

I understand the Purchasing Card may be used only for legitimate Town business and only for purchases permitted by Town policy.

I will not:

- make personal purchases;
- obtain cash advances;
- split purchases to avoid purchasing limits or procurement requirements;
- use the Purchasing Card for any unauthorized purpose.

Documentation

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I understand I am responsible for maintaining adequate documentation for every purchase.

I will:

- obtain and retain an itemized receipt for each transaction;
- provide any additional documentation requested by Finance;
- submit documentation and reconcile transactions within established deadlines;
- make every reasonable effort to obtain replacement documentation if a receipt is lost.

Responsibility for Transactions

I understand that I am responsible for every transaction charged to my assigned Purchasing Card, regardless of who initiated or completed the transaction.

If unauthorized charges occur because I failed to safeguard my card or account information, I understand I may be held responsible as provided by Town policy and applicable laws.

Audits

I understand that Purchasing Card transactions are subject to review by supervisors, Finance, auditors, and other authorized officials.

I agree to cooperate fully with any review, audit, or investigation involving Purchasing Card transactions.

Reimbursement

I understand that I may be required to reimburse the Town for unauthorized or personal purchases made with my Purchasing Card.

I further understand that reimbursement requirements do not limit the Town's ability to impose disciplinary action.

Annual Review

I understand that Purchasing Cards are issued only where a continuing operational need exists.

I acknowledge that:

- my continued participation in the Purchasing Card Program is subject to annual review;
- continued participation in the Purchasing Card Program is not guaranteed;
- I am required to complete annual training and execute a new Cardholder Agreement.

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Acknowledgment

By signing below, I certify that:

- I have received and read the Town of Black Mountain Purchasing Card Policy.
- I understand my responsibilities as a cardholder.
- I agree to comply with all applicable Town policies and procedures governing Purchasing Card use.
- all information and documentation I submit in support of Purchasing Card transactions will be complete and accurate to the best of my knowledge.

I understand that failure to comply may result in reimbursement of unauthorized expenditures, suspension or revocation of Purchasing Card privileges, disciplinary action, termination of employment, and/or criminal prosecution where applicable.

Employee Name: _____

Department: _____

Title: _____

Purchasing Card Number (last four digits): _____

Credit Limit: _____

Employee Signature: _____ Date: _____

Department Head Signature: _____ Date: _____

Finance Officer or Designee: _____ Date: _____