



**Purchasing Cardholder Agreement
4-2025**

This Purchasing Cardholder Agreement represents Southwest Minnesota State University's (SMSU)'s confidence in you as a responsible employee and entrusts you to safeguard and protect SMSU's assets.

I, _____ (**Print Full Name**), as the Cardholder, hereby accept responsibility for a SMSU Purchasing Card issued through SMSU. I have read and agree to the following conditions below regarding my use of the SMSU Purchasing Card.
Please initial after each condition below.

1. I understand that by using the Purchasing Card, I will be making financial commitments on behalf of SMSU and that SMSU will be liable for all authorized charges made with the Purchasing Card. **Initial:** _____
2. **NO Services/Repairs, Maintenance, Speakers, or Entertainment provided by a vendor.** These types of charges may result in card suspension. Vendors cannot store SMSU purchasing card numbers on file of future purchases. **Initial:** _____
3. I understand that **SMSU is exempt from Sales Tax in MINNESOTA only.** If Sales Tax is charged and not refunded, I will pay the sales tax when my report is turned into Business Services. If sales tax is not paid at that time, the purchasing card will be suspended if abused. My use of the Purchasing Card is subject to monitoring and audit by SMSU, without notice to me.
Initial: _____
4. I agree and understand that it is my responsibility to complete the online allocations and submit the completed Expense Report, all original receipts, and all other necessary documentation **by the 15th of each month on Workday** to Business Services. My purchasing card will be suspended if I am repeatedly overdue on entering allocations, reports, sales tax or missing documents.
Initial: _____
5. I understand the Purchasing Card is for my sole use and I will not allow other people to use it. Having a SMSU Purchasing Card is a privilege. **Initial:** _____
6. I understand improper or fraudulent use of this Purchasing Card will result in revocation of the credit card and disciplinary action, & possible termination of employment at SMSU and/or criminal prosecution, as well as reimbursement for the unauthorized use of the Purchasing Card will be required. **Initial:** _____
7. I understand that I may not use the Purchasing Card for any personal or private interests not otherwise eligible for reimbursement under Minnesota State Colleges and Universities policies, and agree not to use it for any prohibited purpose. **Initial:** _____
8. I understand that SMSU will terminate my right to use the Purchasing Card at any time for violating policies. I am required to personally return the card to SMSU immediately upon leaving employment at SMSU. **Initial:** _____
9. If the card is lost or stolen, I agree to immediately contact U.S. Bank Customer Service at 1-800-393-3526. Immediately after contacting U.S. Bank. I also agree to contact Brian Gelster at 507-537-7510 in Business Services. **Initial:** _____

EMPLOYEE:

My signature below indicates that I have read **(1) the System Procedure 7.3.3, (2) the Purchasing Credit Card Program Procedures for SMSU, (3) The Purchasing Card Guide and (4) this agreement,** understand the documents and agree to be bound by it, and any subsequent amendments or addenda, while I am a SMSU Purchasing Cardholder.

Signature: _____ Date: _____

Print Name: _____ Employee ID#: _____

Return this form to Brian Gelster in Business Services.