

Visa Cardholder Agreement

I understand Ione School District has authorized my use of a district credit card for program expenditures on its behalf. In accepting and/or using this card, I agree to be bound by the terms and conditions, which follows:

1. I will use the credit card issued to me for the payment of authorized expenses on behalf of my department or program.
2. I will not obtain cash advances with the card. I will not use the card for any personal purpose. Personal charges are not allowed on the district's Visa.
3. I will allow usage by an unauthorized individual.
4. I understand the card shall not be used for the following: salaries and wages, alcohol, gifts (including flowers or meals for employees), donations to charity, personal services, unauthorized or personal travel and fees/memberships dues. Also, any expenditure that are deemed unallowable by any current or future regulations shall not be charged to the Visa.
5. I agree to provide detailed receipt of all purchases, including meals at restaurants. Summary receipts do not provide sufficient evidence for public confidence and the district will therefore seek reimbursement from me for any amounts charged without detail.
6. Prior to submission of the statement to accounts payable, I will sign it indicating approval of all charges.
7. I understand that a nominal card fee may be charged to my budget.
8. I will immediately surrender the card to the business office in the event of my transfer or separation from the district.
9. I will immediately report any stolen or lost card.
10. I understand that the employee incurring charges against the credit card which are not properly identified or are allowed by the district shall be paid by the employee incurring the charges either by direct payment (cash) or by salary deduction. I further understand that any employee who has been issued a card shall not use the card if any disallowed charges are outstanding and shall surrender the card.

I understand that any variance and/or violation of the above conditions will result in cancellation. Misuse of the card could result in discipline and/or personal liability for dishonored charges.

I have read and understand the above conditions and by signing below, I agree to the terms.

Name of Cardholder: _____
(Print Name)

Signature of Cardholder: _____ Date: _____