

The undersigned, as an approved Purchase Card (P-Card) holder, County Purchasing Agent, or County Approving Official, **fully understand and agree to the following terms and conditions regarding the use and safekeeping of the P-Card(s) entrusted to me:**

1. I accept full personal responsibility for the safekeeping of all P-Cards assigned to me, and I understand that absolutely no one, other than myself, is permitted to use the P-Card(s) assigned to me.
2. I understand I will be making financial commitments on behalf of the County and will obtain fair and reasonable prices;
3. I have received training and agree to follow all procedures established for use of the P-Card;
4. I shall not use the P-Card for any non-County related business, unauthorized purchases, personal purchases, or cash advances or approve any such purchases or advances;
5. I will immediately report the theft or loss of the P-Card to Bank of America at (888) 449-2273, and to the County Purchasing Agent and County Clerk;
6. I understand the use of the P-Card does not exempt me from requirements to obtain certain supplies from required sources as set forth in statutes and P-Card procedures;
7. I shall surrender my P-Card(s) upon (a) transfer to another department; (b) termination of employment with the County; or, (c) request of my supervisor, County Clerk, County Purchasing Agent, or the State Purchasing Director;
8. I understand any purchases made by me or approved by me shall be recorded and reviewed in management reports, for payments, and possible discrepancies and appropriateness of purchase. Further, I acknowledge that I shall have personal liability for any inappropriate purchases made by me or approved by me and agree to reimburse the County for such purchases; and will abide by Ethics Commission Rules;
9. I understand I cannot use the P-Card as a financial reference to obtain personal credit cards or loans;
10. I understand I am personally responsible for obtaining all or requiring all purchase and credit documents (i.e., receipts, invoices, packing slips, receiving documents, disputes, etc.) and submitting them in accordance with County P-Card Procedures;
11. I will use the P-Card only within the limits and restrictions placed upon it unless the County Purchasing Agent or State P-Card Administrator has temporarily lifted same due to an emergency situation or other unique circumstance;
12. The County Clerk and County Purchasing Agent agree to review billings for each billing cycle in accordance with the County P-Card Procedures and to immediately report any discrepancies, inappropriate purchases, or any knowledge of violations of the items enumerated above to the Board of County Commissioners and the State P-Card Administrator.
13. I understand failure to follow any of the above listed terms & conditions or, if found to have misused the P-Card in any manner, may result in (a) revocation of the privilege to use the P-Card; (b) disciplinary action; (c) termination of employment; and/or (d) criminal charges, being filed with the appropriate authority.

My P-card Program Role is: Cardholder County Clerk Purchasing Agent

Cardholder Name (Printed/Typed)	Cardholder Signature	Date Signed
As County Clerk, or Deputy County Clerk, or County Purchasing Agent, I hereby agree to the above terms and conditions and take full administrative responsibility pursuant to the County Purchase Card Procedures for the action(s) of the Cardholder(s).		
County Clerk or Deputy (Printed/Typed)	County Clerk or Deputy Signature	Date Signed
County Purchasing Agent (Printed)	County Purchasing Agent (Signature)	Date Signed

RECEIPT FOR P-CARD

Printed name of cardholder: _____

Dollar and transaction limitations for this cardholder:

Dollars per transaction* _____

Dollars per cycle ("month") _____

*There is no P-Card transaction limit for purchases from a Statewide Contract, utilities, interagency payments, and professional services as defined in Title 18 O.S. §803. Any other State P-Card transaction shall not exceed Five Thousand Dollars (\$5,000.00).

I have reviewed and understand the dollar limitations on my p/card and I acknowledge receipt of the P-Card.

Employee Signature

Date Card Received

P-Card Account No. (Last 6 digits only): _____

Verification Number (Last 4 digits only): _____

County Department/Office: _____

Cardholder Telephone Number: _____

Cardholder Work Location: _____

Office Address

City & State

Zip Code

County Clerk: _____

Name

Phone

The County Purchasing Agent must complete and maintain the following information for each P-Cardholder, County Purchasing Agent, County Clerk.

Initial OMES Training Date: _____

Card Order Date: _____

Initial Entity Training Date: _____

Card Cancellation Date: _____

Periodic Internal Training Date: _____

Card Compromise Date: _____

Periodic Internal Training Date: _____

Date Works Account Deactivated: _____

Periodic Internal Training Date: _____

Periodic Internal Training Date: _____

Periodic Internal Training Date: _____

Periodic Internal Training Date: _____

Periodic Internal Training Date: _____

Periodic Internal Training Date: _____

Periodic Internal Training Date: _____

Employee Termination Date: _____

Card Destruction Date: _____

Copy of completed form and/or card receipt provided to employee on _____