



**ABILENE CHRISTIAN UNIVERSITY**  
Purchasing Card Agreement

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I, \_\_\_\_\_ (Cardholder Name), have applied for a university purchasing card. As a cardholder, I agree to comply with the terms and conditions set forth in the purchasing card policy, p-card website ([www.acu.edu/pcard](http://www.acu.edu/pcard)), and this cardholder agreement.

- I have read this agreement, the purchasing card policy, and the cardholder responsibilities posted on the p-card website. I understand and will follow all of the procedures and requirements as they are expected of me.
- I understand that failure to comply with university policy may result in temporary or permanent card suspension, financial restitution (through personal funds and/or paycheck deductions), employment termination, or other disciplinary actions set forth under university policy for personal purchases.
- I understand and agree that my employer, Abilene Christian University, may deduct money from my paycheck if I make unauthorized purchases using my purchasing card due to my failure to comply with university policy.
- I will ensure the proper, secure and respectful use of the University purchasing card as if it were my own.
- I understand that ACU is liable to JP Morgan Chase for all charges transacted with the card, thus I will take full responsibility for all uses of my card.
- I will ensure that sufficient budget funds exist for making purchases and will only use FOAP numbers I have authority to use.
- I understand that purchases allocated to federal, state, or private grant projects must meet the criteria for allowable expenses for the applicable program.
- I agree to reallocate all monthly p-card charges to the correct FOAPs and to provide a valid business purpose for each transaction on the JPMC Smartdata website by the third business day of the month following my p-card transactions.
- I agree to send a monthly expense reports to Accounts Payable by e-mailing reports to [accountspayable@acu.edu](mailto:accountspayable@acu.edu) or [pcard@acu.edu](mailto:pcard@acu.edu) by the 14<sup>th</sup> day of the month following p-card transactions.
- I will strive to obtain the best value for the university by checking as many sources as possible including vendor discounts identified on the university Purchasing website to assure optimal price, quality, and delivery.
- I agree to use this card for approved purchases only and agree not to charge personal purchases. I understand that the use of my card will be audited by the ACU Accounts Payable department.
- If the card is lost or stolen, I agree to notify Accounts Payable and or JP Morgan Chase immediately.
- If fraudulent activity or unusual p-card purchases are suspected, I agree to call the phone number on the back of the p-card to report any suspicious card transactions to the card company within 30 days of the transaction's posting date.
- If the card needs to be closed for any reason, I agree to send a completed and signed Purchasing Card Change or Close Request form to [pcard@acu.edu](mailto:pcard@acu.edu) for processing.

- I agree to return the card immediately upon request or upon termination of employment (including retirement).

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I understand that **the following purchasing card transactions are considered prohibited:**

- Fuel in a personal vehicle.
- Gift cards and or gift certificates
- Cash advances or ATM Withdrawals
- Cash as a credit for returned items or store credits
- Alcoholic beverages or tobacco products
- Personal purchases such as personal utilities or personal memberships
- Spousal or family expenses unless approved with a Spousal Accompaniment form.
- Cell phones or cell phone monthly bill payments (Please see the Cell Phone Policy for more detail).
- Internal ACU purchases such as ACU Press, ACU Theater tickets, ACU Athletic tickets, ACU dinner tickets, or other ACU purchases.
- Telephone and computer purchases (such items should be purchased through the Information Technology department).

\_\_\_\_\_

\_\_\_\_\_  
**Cardholder's Signature**

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Supervisor's Signature**

\_\_\_\_\_  
Date

Please complete and return the cardholder agreement by e-mailing the completed form to [pcard@acu.edu](mailto:pcard@acu.edu). *Please note:* failure to submit a completed and signed agreement can result in loss of p-card privileges.

Accounts Payable Department  
ACU Box 29110  
Abilene, TX 79699