

**UNIVERSITY OF NEW MEXICO
CARDHOLDER AGREEMENT**

The University of New Mexico is pleased to present you with the Purchasing Card. It represents the University's trust in you and your empowerment as a responsible employee of the University.

I, the undersigned, as a Cardholder, agree to comply with the terms and conditions of this Agreement and all applicable UNM Policies and Procedures including but not limited to:

- Approved and Prohibited Use of the Card
- Purchasing Card Record Keeping
- Placing an Order
- Reporting Lost or Stolen Cards
- Change in Employment Status
- Reconciliation of Monthly Statement

I acknowledge that I have been trained in the use of the Purchasing Card and understand the above-mentioned Policies and Procedures.

I understand that I cannot use the Purchasing Card for personal items and that the Card may only be used to purchase items for the University.

I understand that I am responsible for the security of the Purchasing Card that has been assigned to me. I agree that I will not allow others to use my Purchasing Card.

I further understand that improper use of the Purchasing Card may result in disciplinary action, up to and including termination of employment. Should I use the Purchasing Card for personal items, I authorize the University of New Mexico to deduct from my salary or from other monies owed me, an amount equal to the total of the personal purchases. I also agree to allow the University of New Mexico to collect any amounts owed by me even if the University no longer employs me. I agree that the University has the right to charge me for any legal fees or collection cost for any amounts that I owe.

I understand that the University may terminate my Purchasing Card privileges at any time for any reason without giving me notice of such termination of privileges.

I agree to return the Purchasing Card immediately upon request or change in employment status.

UNM Departments are ultimately responsible and accountable for all the activity that occurs on their PCards.

CARDHOLDER:

Signature: _____	Date: _____
Printed Name: _____	Banner Id #: _____
Department: _____	Phone: _____
Campus Address: _____	Email _____