



Tehama County Department of Education Acceptance of US Bank One Card

The US Bank One Card represents the department's trust in you. You are empowered as a responsible agent to safeguard department assets. Your signature below is verification that you have read and agree to comply with the following responsibilities.

1. I understand the card is for department-approved purchases only and I agree not to charge personal purchases.
2. Improper use of this card can be considered misappropriation of department funds. This may result in disciplinary action up to and including termination of employment.
3. If the card is lost or stolen, I will immediately notify US Bank by telephone and will also immediately confirm the telephone call by notifying the program administrator.
4. I agree to surrender the card immediately upon termination of employment, whether for retirement, voluntary, or involuntary reasons.
5. The card is issued in my name. I will not allow any other person to use the card. I am considered responsible for any and all charges against the card.
6. All charges will be billed directly to and paid directly by the department. The bank cannot accept any monies from me directly; therefore any personal charges billed to the company will be considered misappropriation of department funds.
7. As the card is department property, I understand that I may be periodically required to comply with internal control procedures designed to protect department assets. This may include being asked to produce the card to validate its existence and account number.
8. I will receive a Monthly Reconciliation Statement (MRS), which will report all activity during the statement period. Since I am responsible for all charges, but not for payment, on the card, I will resolve any discrepancies by either contacting US Bank or the program administrator. I will attach receipts for all transactions to the MRS and submit to the business office in a timely manner in order to avoid late charges.
9. The charges made against my card are automatically assigned to the cost center assigned to the card as specified by the program administrator. This code cannot be changed by the user. When changed, the new accounting code will not affect any charges made prior to the charge but will affect future charges.
10. I understand the one card is not provided to all employees. Assignment is based on my need to purchase materials for the department and/or to provide for business travel. My card may be revoked based on change of assignment or location. I understand that the card is not an entitlement nor reflective of title or position.

Employee Signature

Employed Printed Name

Date

Cal-Card Administrator

Date

Last four digits of card number assigned: _____

Date