



P-CARD CARDHOLDER AGREEMENT

The Community College of Denver (College) is pleased to provide you with a Citibank, NA Visa Card (Citibank) otherwise known as the Procurement Card (P-Card). The P-Card represents the College's trust in you as a responsible employee to safeguard and protect its asset.

I, _____, hereby acknowledge receipt of a College P-Card. As a Cardholder, I agree to comply with the terms and conditions of state Procurement, Personnel and Fiscal Rules, College and Colorado Community College System's Fiscal Rules, this Form and the stated provisions of the College's Procurement Card Handbook (Handbook) provided to me. I acknowledge completion of P-Card training and receipt of the Handbook. I have read and understand the Handbook. I understand that the College is liable to Citibank for all charges made by me. I further understand that any unallowable charges made by me are the liability of the College and are subject to personal liability.

As a Cardholder, I agree to accept responsibility for the protection and proper use of my P-Card as outlined in this Form and Handbook. My P-Card is to be used only by me to pay vendors for allowable purchases of goods and services. I cannot use my P-Card for personal purchases or any of the other prohibited items listed in the Handbook. I shall protect my P-Card at all times to prevent its unauthorized use. I understand that the College WILL audit the use of my P-Card. Should my P-Card be lost, stolen or compromised in any manner, I shall immediately advise Citibank (1-800-248-4553) for cancellation purposes, my Approving Official, and Program Administrator. I also agree to reallocate my charges or arrange for reallocation within five (5) business days of notification. Purchases must be in accordance with the System President's procedure SP 8-61a, Purchasing Approval Policy including obtaining appropriate written approvals in advance of executing purchases.

I understand that my P-Card is the property of the College, assigned to me, and that, in the event of willful or negligent default of these obligations, the College shall take any recovery action deemed appropriate, and that is permitted by law. Furthermore, upon notification of my transfer from the College or termination of employment with the College, I agree to return my P-Card to the Program Administrator for immediate cancellation.

Applicant: _____
Print Name Signature Date

Department: _____ **Campus Phone #:** _____

Campus Address: _____ **Email:** _____

Training Completed by: _____ **Date:** _____

Original to be retained in Purchasing Office of Fiscal Services.