**Cardholder Agreement**

By signing this cardholder agreement, you agree that you have been informed of and understand the correct procedures for using a [Organization Name] purchasing card and that you will comply with rules and regulations as they relate to the use of the card.

* The purchasing card is designed to facilitate and expedite the purchase of goods and services for [Organization Name] needs. No personal purchases are to be made with the card.
* The cardholder is authorized to make card transactions. Only the cardholder may authorize other departmental employees to make transactions with the card.
* Fraudulent use or abuse of the card will result in immediate suspension of privileges and may result in corrective action up to and including termination and/or criminal action. In addition, the [Organization Name] will seek restitution for any inappropriate charges.
* The cardholder is responsible for maintaining receipts and records pertaining to card transactions and for proper reconciliation of all transactions.
* The cardholder is responsible for the prompt resolution of card discrepancies according to established procedures.
* The card must be surrendered to the [Organization Position or Department] upon termination of employment with the [Organization Name].
* If the card is lost, misplaced, or stolen, the cardholder is responsible for informing BMO Customer Service Line @ 1-800-261-3361 and notify the [Organization Position or Department], as soon as possible.

I have read and understand the statements above and agree to use the purchasing card in accordance with all procedures, rules and regulations governing card usage.

Card Number: Card Limits: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cardholder Name: Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Issued: Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The *Cardholder Agreement* is for your internal use only.

This sample can be customized for members participating in the AMSC Procurement Card. AMSC does not require a copy.

1. Update the areas in red to reflect your organization
2. When changes are complete delete this text box
3. Save and distribute as needed