

**STATE OF WEST VIRGINIA  
PURCHASING CARDHOLDER AGREEMENT**

This agreement outlines the responsibilities I have as a holder of the State of West Virginia Purchasing Card (Cardholder). My signature indicates I have read and understand these responsibilities and that I agree to adhere to West Virginia Code §12-3-10a and rules promulgated thereunder, to the State Purchasing Card Policies and Procedures, and any applicable purchasing guidelines.

- 1) I understand that the Purchasing Card is solely for official business of the State of West Virginia, intended to facilitate the payment of goods and services for the conduct of state business within applicable activity limits and is not for my personal use.
- 2) I understand that use of the Purchasing Card for payments not authorized within the State Purchasing Card Policies and Procedures will be considered misuse of the Purchasing Card and will be grounds for (a) immediate forfeiture of the Purchasing Card, (b) disciplinary action which may include termination of my employment and (c) conviction of a felony. I understand that I am personally liable for any payments not authorized by the spending unit and permitted within the State Purchasing Card Policies and Procedures.
- 3) I understand that all charges will be billed directly to and paid directly by the State of West Virginia and that CitiBank cannot accept payment from me directly.
- 4) I understand that the Purchasing Card is issued in my name and I am responsible for maintaining the security of the card and for all charges made by or authorized by me against it.
- 5) I will safeguard the Purchasing Card with appropriate security from the time I receive the card until it is surrendered to the appropriate person with the State of West Virginia. If the Purchasing Card is lost or stolen, I agree to notify CitiBank immediately at **1-800-790-7206 or 1-800-VISA911 and the State Auditor's Office, Purchasing Card Program at 304-558-2251.**
- 6) I agree to follow West Virginia State Law, purchasing guidelines of my employing agency, and established Purchasing Card Policies and Procedures.
- 7) I understand that the Purchasing Card must be surrendered upon request and/or upon my termination of employment from the State of West Virginia.
- 8) I have received appropriate training and understand West Virginia Code §12-3-10a and the Purchasing Card Policies and Procedures.
- 9) I agree that, should I violate the terms of the Purchasing Cardholder Agreement, I will reimburse the State of West Virginia for all charges improperly authorized by me to the Purchasing Card and all costs incurred by the State of West Virginia related to the collection of such charges.

\* Cardholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Cardholder's Name: (Please print) \_\_\_\_\_

Agency Name: \_\_\_\_\_

Agency Organization Number:

\*\* Agency Coordinator's Signature: \_\_\_\_\_

*\*Cardholder must sign and forward this form prior to issuance of a purchasing card.*

*\*\*Agency Coordinator should forward a copy of this form to the State Auditor's Office, Purchasing Card Program.*