

PURCHASING CARD APPLICATION

Section 1 Card Holder Information & Agreement

(Please check one) Employee of RFCUNY College _____

_____ Project Account #

_____ Card Amount Requested

_____ First Name Middle Initial Last Name

_____ Date of Birth (MM/DD/YYYY)

_____ Business Address (Required)

_____ Home Address (Required)

_____ Address 1

_____ Address 1

_____ Address 2 (Dept. and Room #)

_____ Address 2

_____ City State Zip

_____ City State Zip

_____ Business Phone

_____ Home Phone

_____ Country of Citizenship

_____ Mother's Maiden Name

_____ Email Address

_____ Employee ID or CUNYFIRST ID (Required)

I am aware that J.P. Morgan purchase card transactions should be reconciled in Concur within 35 days of when the transactions occurred. In addition, I am aware that failure to submit reconciliations for all JP Morgan Purchase card Transactions will result in the suspension or termination of the Research Foundation's purchase card.

_____ Cardholder / Applicant's Name Signature(must be hand-signed) Date

Section 2 Principal Investigator and Grants Officer Signature

_____ Signature of Principal Investigator Date

_____ Grant's Officer Signature Date

PURCHASING CARDHOLDER AGREEMENT

I (name) _____, as the Cardholder, agree to the following conditions regarding my use of the Research Foundation Purchasing Card (P-Card) .

I agree to use the P-Card only for authorized purchases for the Grant or Contract to which it is attached and within the restrictions for that account.

I understand that should I make an unauthorized purchase with the P-Card or use the P-Card in an inappropriate manner, I will be personally liable for the charge(s) and will relinquish the P-Card.

I understand the Research Foundation monitors and audits my use of the P Card.

I agree to return the P-Card to an authorized University or Research Foundation representative, at the request of the Research Foundation, or upon termination of my employment.

I have read the Research Foundation's Fact Sheet on the use of the P-Card and will abide by all the requirements.

I understand that the P-Card cannot be used for cash advance, gift cards, alcoholic beverages, individual food and travel expenses (other than transportation), and gasoline, or for equipment and other single transactions of \$5,000 or greater. If the card is used for transportation charges, a completed Travel Expenses Form must accompany the P-Card statement.

I agree to submit timely reconciliations with supporting documentation within 35 days of when the transaction was incurred. I understand that if any transaction is outstanding for 60 days or more, my P-Card privileges may be suspended or revoked.

My signature below indicates that I have read this agreement, understand and agree to be bound by it, and any subsequent amendments or addenda, as an authorized user of the Purchase Card from the Research Foundation of The City University of New York.

Cardholder's Signature _____ Date _____

Cardholder's Name (Print) _____

Project Investigator/Director's Signature _____ Date _____

Grant Officer's Signature _____ Date _____

Original signatures are required on the application and agreement forms