

INTER-DEPARTMENT CREDIT CARD AUTHORIZATION AND USE AGREEMENT

As an employee of Northwest Educational Service District 189 (NWESD 189), I have read Board Policy 6210 and Procedure 6210-P relating to purchase authorization and control, and credit card operating guidelines. I understand my supervisor authorized my use of his/her NWESD 189 credit card for approved NWESD 189 expenditures on behalf of our department. In accepting and using the _____ (please note Visa and/or Costco) card(s), I agree to be bound by the following terms and conditions:

- I will use the card for the payment of **authorized and pre-approved expenses** on behalf my program/department. Such expenses include air flight, ground transportation (shuttles, cabs, etc.), lodging and other purchases where the vendor will not accept a purchase order and/or it is more expedient or cost effective to use the credit card. .
- I **will not** use the card to obtain cash advances.
- I **will not** allow usage by an unauthorized individual.
- I **will not** use the card for personal use or for any other non-NWESD 189 purpose.
- I understand the card **shall not** be used for the following: Salaries or wages, gifts (including flowers or meals for employees), donations to charity, personal services, supplies, alcoholic beverages, meals, personal vehicle (even when the vehicle is used for agency authorized travel) costs or non-travel related expenses.
- I understand purchases are limited to preauthorized dollars to cover NWESD 189 expenses.
- I understand that all NWESD 189 purchasing rules still apply including, but not limited to, a purchase order must be approved prior to purchase.
- I will obtain itemized receipts or other appropriate documentation for all transactions that I am responsible for and will submit them in a timely manner to my supervisor.
- I understand that my purchases will be monitored by my director at least once a week.
- I will immediately surrender the card to my supervisor in the event of my transfer or separation from the agency.
- **I will immediately report any stolen or lost card to Bank of America and will immediately follow up with a notification to the fiscal department and my director.**
- **I understand that I am responsible for any charges made by me against the credit card not properly identified or not allowed by the NWESD 189 and such disallowed charges shall be paid by personal check, United States currency, or salary deduction. I further understand, in compliance with RCW 42.24.115, that in the event any such disallowed charges are not repaid before the credit card billing is due and payable, the NWESD 189 shall have a prior lien against and a right to withhold all funds payable to myself up to the amount of the disallowed charges with penalties and interest at the same rate as charged by the company which issues the credit card. I further understand the card should not be used if any disallowed charges are outstanding and will surrender the card upon request of the credit card administrator (Assistant Superintendent of Finance and Compliance).**

_____ Users Initials

I understand that any variance and/or violation to the above conditions can result in cancellation of my credit card privileges. Misuse of the card could result in discipline and/or personal liability for dishonored charges as acknowledged herein.

All NWESD 189 travel credit card use is subject to examination by the state auditor’s office.

I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE TERMS AND CONDITIONS:

Signature

Date

I GIVE THE AFORMENTIONED PERSON PERMISSION TO USE MY NWESD 189 CREDIT CARD FOR NWESD 189 EXPENDITURES AS DESCRIBED IN THE TERMS AND CONDITIONS NOTED ABOVE:

Supervisor Signature

Date