

### **Concordia College P-Card User Agreement**

You are being entrusted with a Concordia College purchasing credit card (P-card), issued by Wells Fargo Bank. The card is provided to you based on your need to operate on a daily basis and to purchase materials for Concordia College. It is not an entitlement nor reflective of title or position. Your signature below indicates that you have read and will comply with the terms of this agreement and the Concordia College P-Card Program Policies and Procedures Manual.

1. I understand that I will be making financial commitments on behalf of Concordia College and will strive to obtain the best value for Concordia College.
2. I understand that under no circumstances will I use the P-Card to make personal purchases, either for myself or for others. Using the card for personal charges could be considered misappropriation of Concordia College funds and could result in corrective action, up to and including termination of employment.
3. The P-Card is issued in my name. I am considered responsible for any and all charges against the card, unless it is determined the charges are fraudulent due to the actions of someone other than me.
4. The P-Card is Concordia College property. As such, I understand that I may be periodically required to comply with internal control procedures designed to protect Concordia College assets. This may include being asked to produce the card to validate its existence and account number.
5. If the card is lost or stolen, I will immediately notify Wells Fargo Bank Customer Service by telephone at **800-932-0036** and the Purchase Card Administrator at Concordia College, Diane Aafedt **218-299-4477**.
6. I will receive a monthly statement, which will report all purchasing activity during the statement period. I will reconcile the statement each month, make any coding changes to the expenses if needed, and resolve any discrepancies by either contacting the merchant or Wells Fargo Bank Customer Service myself.
7. I agree that should I violate the terms of this Agreement and use the P-Card for personal use, Concordia College shall have the right to deduct any amounts owed, from my paycheck or final paycheck. The laws of the state of Minnesota shall govern the enforceability of this agreement.
8. I agree to surrender the P-Card immediately upon termination of employment, whether for retirement, voluntary, or involuntary reasons.

I have read and will follow the P-Card Policies and Procedures. Failure to comply with this Agreement may result in either revocation of my use privileges or other corrective action, up to and including termination.

\_\_\_\_\_  
Employee Name (Print)

\_\_\_\_\_  
Last 8 Digits of Card Number

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date