

## APPENDIX “A”

### HOLY SPIRIT ROMAN CATHOLIC SEPARATE REGIONAL DIVISION NO.4

## CARDHOLDER AGREEMENT

The Purchasing Card represents the school division’s trust in you. You are empowered as a responsible agent to safeguard assets. Your signature on this document is verification that you have read the Cardholder Reference Manual and agree to comply with the Purchasing Card guidelines as set out therein, including the following responsibilities:

1. I understand the card is for approved purchase only, and I agree not to charge purchases outside the parameters described in the Cardholder Reference Manual.
2. If the card is stolen or lost, I will immediately notify the Royal Bank and the Plan Administrator by telephone. I will confirm the telephone call with a written notice sent by mail or facsimile with a copy of the notification to the Plan Administrator.
3. I agree to surrender the card immediately upon termination of employment, whether for retirement, voluntary or involuntary reasons.
4. The card is issued in my name. I will not allow any other person to use the card. I am considered responsible for any and all charges against the card.
5. All charges will be billed directly to and paid directly by the Board. The Royal Bank cannot accept any monies from me directly, therefore any personal charges billed to the school division will be considered misappropriation of Board funds.
6. As the card is Board property, I understand that I may be periodically required to comply with internal control procedures designed to protect assets. This may include being asked to produce the card to validate its existence and account number. I will also be required to produce receipts and statements to audit its use.
7. I will receive a Monthly Reconciliation Statement, which will report all activity during the statement period. Since I am responsible for all charges (but not payment) on the card, I will resolve any discrepancies by either contacting the vendor of the Royal Bank.
8. I agree to fully complete the reconciliation of my Monthly Reconciliation Statement within the timelines specified in the Cardholder Reference Manual (five working days from receipt of statement).
9. The charges made against my card are automatically charged against the account assigned to the card. I understand that I am responsible to ensure that the purchases made on my card are charged to the appropriate account(s). The appropriate accounts will be provided for me.
10. I understand the Purchasing Card is not necessarily provided to all employees. Assignment is based on my need to purchase materials for the school division. My card may be revoked based on change of assignment or location. I understand that the card is not an entitlement nor reflective of title or position.
11. Improper use of this card can be considered misappropriation of Board funds. This may result in disciplinary action, up to and including termination of employment.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CARDHOLDER SIGNATURE

\_\_\_\_\_  
CARDHOLDER NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PLAN ADMINISTRATOR