Los Angeles Unified School District
Procurement Services Group
Procurement Card Program

P-CARD HOLDER AGREEMENT

By signing below, I agree that:

- I have completed the P-Card Online Training program, and fully understand all P-Card policies and procedures.
- Spending limits on my card are **$** 10,000 **per transaction***

I understand that if my location has: ***One card only*** ***the spending limits will be $10,000 per transaction / $50,000 per month***

or

Two cards ***the spending limits will be $10,000 per transaction / $25,000 per month each***

- I will use the card only for ***authorized items*** and purchase only from ***authorized merchants***.
- I will use the card for ***official District business only*** and NOT for any ***personal transactions***.
- I will ***keep the card secure at all times***, and ***immediately notify*** US Bank, the Approving Official, and the P-Card Unit of loss, theft, or fraudulent use of the card.
- I will be held ***personally liable*** to the District for any ***unauthorized use*** of the card, including
  - ***- prohibited items/merchants*** ***- over-limit transactions***
  - ***- personal use*** ***- loan of the card to any other person for any reason***
- I will follow ***reconciliation procedures*** found in the *Procurement Manual*, reconcile all transactions and attach receipts for the billing cycle by the 15th of the following month and monitor available funds balances ***regardless of access to the online reconciliation system***.
- I will use **Specially Funded Program** funding lines only for appropriate purchases, as defined in the Federal Guidelines (e.g., Title One funds may be used only for purchases related to literature and math), and provide a **detailed description** of items purchased when performing reconciliation of Specially Funded Program purchases.
- I will upload and attach copy of receipt or invoice detailing the purchase to the transaction record in SAP.
- I understand and agree that I must ***return the P-Card***, cut in half, to my Approving Official or directly to the P-Card Unit, upon
  - ***-transfer to another location*** ***-separation from District employment***,
  - ***-cancellation of card privileges***
- I will comply with all other policies and procedures enumerated in the ***Procurement Manual***.
- I understand that unauthorized use or misuse of the card may result in disciplinary action under applicable District procedures.

Cardholder Name: (print) _____ ***Location:*** _____ ***Region:*** _____

Signature: _____ ***Employee #*** _____ ***Date:*** _____

APPROVING OFFICIAL AGREEMENT

By signing below, I agree that:

- I have completed the P-Card Online Training program, and fully understand all P-Card policies and procedures.
- I will ***review the accounts*** of all Cardholders for whom I am responsible bi-weekly, and ***approve*** or otherwise follow up on all transactions ***by the 30th of each month.***
- I will ensure that the following policies and procedures are adhered to by all Cardholders for whom I am responsible:
- Cardholders will use the card only for ***authorized items***, use only ***authorized merchants***, use the card for ***official District business only*** and for ***no personal transactions***.
- Cardholders will ***keep the card secure at all times***, and ***immediately notify*** US Bank, me (the Approving Official), and the P-Card Unit of loss, theft, or fraudulent use of the card.
- Cardholders will be held ***personally liable*** to the District for any ***unauthorized use*** of the card, including
  - ***-prohibited items/merchants*** ***-over-limit transactions***
  - ***-personal use*** ***-loan of the card to any other person for any reason***
- Cardholders will follow ***reconciliation procedures*** as described in the ***Procurement Manual***, and reconcile by the 18th of the month.
- Cardholders will use **Specially Funded Program** funding lines only for appropriate purchases, as defined in the Federal Guidelines (e.g., Title One funds may be used only for purchases related to literature and math), and provide a **detailed description** of items purchased when performing reconciliation of Specially Funded Program purchases.
- Cardholders will upload and attach copy of receipt or invoice detailing the purchase to the transaction record in SAP.
- ***Only the named Cardholder*** will use the card assigned to him or her. Cardholders must ***return the card***, cut in half, to me (the Approving Official) or directly to the P-Card Unit, upon
  - ***-transfer to another location*** ***-separation from District employment***,
  - ***-cancellation of card privileges for any reason***
- I agree to comply with and enforce all other policies and procedures enumerated in the ***Procurement Manual***.

Approver Name: (print) _____ ***Location:*** _____ ***Region:*** _____

Signature: _____ ***Employee #:*** _____ ***Date:*** _____