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 as follows: **$ _____ per transaction** **$ _____ per month**

**** Locations may choose either:*** ***One card only with spending limits of $3,000 per transaction / $20,000 per month***
or
Two cards with spending limits of $1,500 per transaction / $10,000 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*** Citibank, 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 18th 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: _____ Local District: _____
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 21st 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*** Citibank, 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: _____ Local District:: _____
Signature: _____ Employee #: _____ Date: _____