

# NORTHWESTERN UNIVERSITY KELLOGG SCHOOL OF MANAGEMENT PROCUREMENT CARD CARDHOLDER AGREEMENT

---

## Participating Cardholder Acknowledgment of Responsibilities

By participating in the Northwestern University (NU) Procurement Card Program as a Cardholder, I \_\_\_\_\_ assume responsibilities

PRINT NAME

pertaining to the operation and administration of the Procurement Card Program. These responsibilities include but are not limited to the following:

The Northwestern University Procurement Card is to be used for business expenditures only. The Procurement Card may only be used under the parameters and procedures established for the Procurement Card Program which are detailed in *The Procurement Card Cardholder Guide*. The Northwestern University Procurement Card may not be used for personal purchases, business or personal travel and entertainment purposes.

The Procurement Card will be issued in the name of the Cardholder. By accepting the Card, the Cardholder assumes responsibility for the Card and will be responsible for all charges made with the Card. The Card is not transferable and may not be used by anyone other than the Cardholder.

The Northwestern University Procurement Card must be maintained with the highest level of security. If the Card is lost or stolen, or if the Cardholder suspects the Card or Account Number to have been compromised, the Cardholder agrees to immediately notify JPMorgan Chase at 1-800-316-6056 and the NU Procurement Card Administrator. The Cardholder should keep a record of the card number and the Bank number in a safe place for easy access in the event the card is lost or stolen. The Cardholder agrees to reimburse NU for any unauthorized purchases made with the Procurement Card up to the point where the card is reported lost or stolen.

All charges will be billed and paid directly by Northwestern University. On a monthly basis, the Cardholder will receive a statement listing all activity associated with the Card. This activity will include purchases and credits made during the reporting period. While the Cardholder will not be responsible for making payments, the Cardholder will be responsible for the verification and reconciliation of all Account activity.

Cardholder Accounts may be subject to periodic internal control reviews and audits designed to protect the interests of Northwestern University. By accepting the Card, the Cardholder agrees to comply with these reviews and audits. The Cardholder may be asked to produce the Card to validate its existence and produce statements and receipts to verify appropriate use.

Parameters and procedures related to the Procurement Card Program may be updated or changed at any time. Northwestern University will promptly notify all Cardholders of these changes. The Cardholder agrees to and will be responsible for the execution of any program changes.

The Cardholder who is a NU employee agrees to surrender and cease use of the Card upon termination of employment whether for retirement, voluntary separation, resignation or dismissal. In addition, the Cardholder must surrender and cease use of the Card in the event of a transfer or relocation. The Cardholder who is a Fraternity or Sorority member agrees to surrender and cease use of the Card upon ending service as Treasurer or President of the house, upon ending membership with his or her house, or leaving NU as a student. The Cardholder may also be asked to surrender the Card at any time deemed necessary by the University. The card should be surrendered to the Department Head.

Misuse or fraudulent use of the Card may result in personal liability, prosecution, disciplinary actions, and may be grounds for dismissal from the Program and or the University.

By signing below, I acknowledge that I have read and agree to the terms and conditions of this document and the NU Procurement Card Cardholder Guide. I certify that as a participating Cardholder of the Northwestern University Procurement card Program, I understand and assume the responsibilities listed herein.

\_\_\_\_\_  
Cardholder Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Last 4-Digits of Social Security #

\_\_\_\_\_  
Birthdate

\_\_\_\_\_  
(University Mailing Address) Street

\_\_\_\_\_  
Email

\_\_\_\_\_  
City

\_\_\_\_\_  
St/Zip

\_\_\_\_\_  
Phone (Campus)

\_\_\_\_\_  
Transaction Limit

\_\_\_\_\_  
Monthly Limit

\_\_\_\_\_  
Mother's Maiden Name or Password

\_\_\_\_\_  
Department Name

\_\_\_\_\_  
CUFS Billing Account

\_\_\_\_\_  
Approver of purchases (signature)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean's office (signature)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date