

SOUTHEASTERN LOUISIANA UNIVERSITY
PROCUREMENT CARD AND CBA PROGRAM
APPROVER AGREEMENT FORM

As a designated cardholder approver of the State of Louisiana LaCarte Purchasing Card and CBA Program for Southeastern Louisiana University. I am accepting responsibility for the assurance that all charges against the card which I am approving, to the best of my knowledge, were properly charged for legitimate State of Louisiana business needs and travel as initialed and outlined in this agreement, and are in accordance with all purchasing rules and regulations, statutes, executive orders and PPM49, if applicable, and all state and agency policies, which I have read and completely understand.

I further agree:

- In addition to the responsibilities listed, obtain, understand and comply with all state and agency policy requirements, responsibilities and procedures, PPM49, all purchasing rules, regulations, statutes and executive orders in regards to the State Liability LaCarte Purchasing Card and CBA Program.
- To ensure that cardholder's state/agency contract purchases do not exceed \$5,000 per day/per contract.
- To ensure that every transaction complies with the terms and conditions of this agreement, the State's Purchasing Card and CBA Policy, my agency policies, all purchasing rules, regulations, statutes and executive orders and State Liability Travel Card Policy and PPM49, if applicable.
- To obtain agency program training and sign an Approver Agreement Form, annually, acknowledging responsibilities associated with the State liability P-Card Program, with the documents given to agency program administrator and will receive a copy for myself.
- To obtain annual approver certification through the State's online certification training program with a passing grade of at least 90.
- To ensure that any card requested be for an employee with a need for a card and not an automatic process.
- To secure all assigned Workday application User IDs and passwords. Never sharing User ID and passwords and/or leaving work area while logged into the system or leaving log-in information in an unsecure area.
- To ensure that I will keep well informed of program updates from the agency program administrators or anyone associated with the State Liability LaCarte Purchasing Card Program.

- To ensure that online accounts, such as Amazon, PayPal, EBay, etc, if necessary and allowed for use by an employee, have a standalone business account or registration and is not combined with an individual's personal account. By doing this, it will allow me/agency access to view the accounts online while verifying that all purchases were business related, email receipts were not altered and that all purchases are being delivered directly to the agency.
- To immediately notify the agency's program administrator upon separation, change in department/section or during extended leave for any cardholders for which I am responsible. Ensuring that proper procedures, as outlined in the agency policy, are being followed regarding how to handle approvals properly, etc.
- To complete exit procedures including collecting and returning card to program administrator, upon termination of the employee. Exit procedures include a review by the cardholder, supervisor and/or program administrator of all current charges on the account, verifying that all necessary supporting documents and receipts have been obtained.
- To ensure that the P-Card is retrieved from the employee upon separation or change in department/section; returning card to the agency program administrator. Ensure that agency program administrator makes necessary changes to cancel the card and to remove me as the employee's approver and/or employee from my list of cardholders for which I am responsible.
- To immediately notify the agency's program administrator if the card is lost, stolen or has fraudulent charges and to direct the cardholder to immediately report to Bank of America.
- To ensure that, at a minimum, annually, I will review cardholders and cardholder's limits for all that I am an approver, to ensure appropriate utilization of the card and program intent and that a file is maintained showing compliance with this requirement. Review will also include cardholders limits, MCC Codes, etc., making certain that the card is working properly for the cardholder. If limits or codes are not allowing the cardholder to perform duties, I will contact the agency program administrator to make necessary adjustments.
- To immediately report any fraud or misuse, whether actual, suspected, or for personal non-business related purchases to the agency program administrator as well as the head of the agency, and other personnel/agencies as required. I agree to participate in any disciplinary actions which may be deemed appropriate, if necessary.
- To acknowledge that any recognized or suspected misuse of the P-Card program may be anonymously reported to the State of Louisiana Inspector General's Fraud and Abuse Hotline at 1-866-801-2549 or for additional information you may visit <http://oig.louisiana.gov/index.cfm?md=pagebuilder&tmp=home&nid=3&pnid=0&pid=4&catid=0>
- To ensure transactions do not include State sales tax.

- To ensure, to the best of my knowledge, that each approved transaction have an appropriate business purpose and need and that each transaction has a receipt and appropriate supporting documentation scanned into Workday. In the event that a transaction is being investigated, the cardholder must explain and justify the transaction being questioned.
- To ensure that every transaction is not a duplication of a personal request and/or reimbursements through the individual travel reimbursement process (travel expense form or travel system), if applicable.
- To ensure that every transaction has a receipt, receipt's date is verified to ensure the amount is correct and within PPM49 allowance, if applicable, and that the receipt date is accurate and matches a legitimate business purchase and need and/or known business trip allowance and dates. (travel authorization form or travel system), if applicable.
- To ensure transactions have been coded properly as outlined in the agency policy and procedures.
- To ensure that each cardholder's email address is the State of Louisiana business email address and that the cardholder and cardholder's email address match in Workday.
- To ensure that a cardholder is NEVER the final approver of his own P-Card transactions.

AS AN APPROVER, I RECOGNIZE THE RESPONSIBILITIES OF CARDHOLDERS ARE SUCH:

- Cardholder must never use the State P-Card for personal or non-business purchases. P-Card is for State business use only.
- Cardholder must never loan the card to anyone for use.
- Cardholder is to ensure that each transaction has an appropriate business purpose and need for state business purchase, that all approvals were obtained for the purchase, that each transaction has a receipt, appropriate supporting documentation and each transaction's supporting documentation is scanned into Workday and tied to each applicable transaction. In the event that a transaction is being investigated, I fully understand that I must explain and justify any transaction being questioned. Failure to do so should result in cancellation of P-Card.
- Cardholders may not exceed \$5,000 per contract per day.
- Cardholder must never include full P-Card account number in emails, fax, reports, memos, etc.
- Cardholder must never attempt to access cash.
- Cardholder must never accept cash in lieu of a credit to the P-Card account.

- Cardholder must never place incidentals on State P-Card without Office of State Travel/agency prior approvals, if applicable.
- Cardholders must never purchase gift cards or gift certificates on their State P-Card.
- Cardholder must never use P-Card for alcohol, food or entertainment services without prior approval from Office of State Travel/agency.
- Cardholder must present a personal credit card when checking into a hotel to cover any incidentals, if applicable.
- Cardholder should never use P-Card for fuel or vehicle maintenance if the agency is part of the Fuel Card and Maintenance Contract. If cardholder is in a geographical location where the contract is not covered, cardholder may use P-Card to purchase gasoline, but only for a rental or state owned vehicle, never for a personal vehicle.
- Cardholder must never use P-Card to avoid procurement or payment procedures.
- Cardholder must obtain agency program training and sign a Cardholder Agreement Form, annually, with the documents given to agency program administrator along with cardholder receiving a copy.
- Cardholder must obtain annual cardholder certification through the State's online certification training program with a passing grade of at least 90.
- Cardholder must secure all assigned application User IDs and passwords. Never share a User ID and passwords and/or leave a work area while logged into the system or leave log-in information in an unsecure area.
- Cardholder must never make a payment directly to the bank if unauthorized charges or accidental personal charges are placed on the card. They should immediately contact the agency program administrator.
- Cardholder must immediately notify approver, Bank of America and the agency program administrators if fraudulent charges are noticed on the State P-Card.
- Cardholder should always notify approver or the agency program administrator if higher or lower limits are necessary to perform duties.
- Cardholder must immediately notify Bank of America, approver and the agency program administrator if the P-Card is lost or stolen.

I understand that failure to properly fulfill my responsibilities as a P-Card approver could result, at a minimum, in the following:

- Written counseling which would be placed in my employee file for a minimum of 12 months.
- Consultation with agency program administrator, and possibly head of the agency and Internal Auditor.
- Disciplinary actions, up to and including termination of employment.
- Legal actions, as allowed by the fullest extent of the law.

I have read and understand all my responsibilities above, along with all guidelines, policies and procedures, rules and regulations, PPM49, statutes and executive orders, if applicable, associated with the State Liability LaCarte Purchasing and CBA Program.

Approver (please print): _____

Approver Signature: _____

Date: _____

STATE OF LOUISIANA CARD PROGRAM- APPROVER AGREEMENT FORM

The State of Louisiana (“State”) and Southeastern Louisiana University (Agency name) are providing an employee you supervise with a card from the State of Louisiana Card Program. The Card must only be used for State of Louisiana official business. All acceptable charges must be in accordance with current PPM49 allowances, Statewide Card Policy Southeastern Louisiana University (Agency name) Policy, and all current purchasing rules and regulations, if applicable.

I _____ (“Approver”) agree that I shall comply with the applicable rules and policies listed above, this Agreement, and any subsequent revisions to any of the foregoing.

Conditions for State of Louisiana Card Program

As the Approver, I agree to ensure all charges against the card are proper as outlined in this Agreement and all relevant rules and policies, which I have read and completely understand. I further agree to:

- (1) Never approve the use the Card for the purpose of paying vendors for allowable purchases of goods and services which are not for official state business;
- (2) Never approve the use of the Card for personal purchases or personal travel;
- (3) Never approve charges incurred by anyone other than the cardholder;
- (4) Always verify the charges on the Card and to reject any charges not in compliance with applicable rules and policies
- (5) Ensure the cardholder has reconciled all charges within the Southeastern Louisiana University (Agency name) prescribed timelines, but in no instance, later than 15 days past the statement date. I understand and agree that DOA/ Southeastern Louisiana University (Agency name) will monitor the use of the Card and that the cardholder will be personally liable for any unauthorized use thereof.

Penalties for Misuse of State of Louisiana Card Program

I acknowledge and agree that I understand that in the case of my willful or negligent default of my obligations under this Agreement, the State/ Southeastern Louisiana University (Agency name) has the following rights, to the extent authorized by law:

- (1) The State may pursue any remedy for the recovery of improperly charged amounts, including referral to the Office of Debt Recovery for collection;
- (2) The State/ Southeastern Louisiana University (Agency name) may pursue any appropriate corrective action, including cancellation of card privileges, discipline up to dismissal, and criminal charges. Once privileges are revoked, for any reason, the cardholder will not be allowed to receive a new card unless prior approval is granted through the Office of State Travel.

Lost Card

If the Card is lost, stolen, or compromised in any manner, I shall immediately notify Southeastern Louisiana University (Agency name) Program Administrator and the issuing bank.

Return of Card

Upon the transfer, change in duties, termination of employment, suspension, retirement, or cancellation of the cardholder, I agree to notify my Southeastern Louisiana University (Agency name) Program Administrator and to promptly return the Card to my Southeastern Louisiana University (Agency name) Program Administrator.

Approver

Personnel Number: _____

Signature: _____

Date: _____

Print Name: _____

Phone: _____

Section: _____

E-Mail: _____