



Financial Services Department  
Procurement Office – Box 409

I have received Gettysburg College corporate card(s) identified below:

	<u>Card Type</u>	<u>Single Trans. Limit</u>	<u>Monthly Credit Limit</u>	<u>Name on Card</u>
<input type="checkbox"/>	Travel Card	\$2000 Fixed	\$10000 Fixed	
<input type="checkbox"/>	General Purchasing Card	\$1000 Fixed	\$5000 Fixed	
<input type="checkbox"/>	General Purchasing Card	\$5000 Fixed	\$15000 Fixed	
<input type="checkbox"/>	Department Card	\$300 Fixed	\$1000 Fixed	
<input type="checkbox"/>	Special Purpose Card	N/A		

I understand that although the card is issued in my name, it is property of the College and may be used for business purposes only.

I acknowledge receipt of, or access to, the College's Expense and Reimbursement Guidelines and also the Cardholder's Guide for the College card program ([www.gettysburg.edu/about/offices/fa/financial\\_services/](http://www.gettysburg.edu/about/offices/fa/financial_services/)) and I understand the terms and conditions for the use of my card. I agree to comply with and adhere to all College guidelines and the procedures of my department for use of my corporate card.

I understand that I will not be able to withdrawal cash from any source. The PIN is for use with merchants requiring it of the customer.

I understand that Gettysburg College is liable for all charges made to my corporate card account and misuse of my card may result in disciplinary action to and possible legal action against me.

I understand that I am responsible for reconciling my card purchases on a monthly basis and submitting all original supporting documentation with the monthly report to Accounts Payable by the 12<sup>th</sup> day of the following month.

I understand that Gettysburg College may terminate my right to use my corporate card at any time. I agree to return the card to Gettysburg College upon request or separation of employment.

I agree to notify PNC Bank Customer Service at 1-800-685-4039 and the card administrators immediately if my card is lost or stolen or if I have knowledge of any lost or stolen Gettysburg College corporate cards.

My signature below verifies that I understand the program guidelines and agree to comply with them:

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Cardholder Agreement (with Vendor Specific Cards)



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<input type="checkbox"/>	Special Purpose Card	N/A		
<input type="checkbox"/>	Vendor Specific Card			
<input type="checkbox"/>	Vendor Specific Card			
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