

**Slippery Rock University of Pennsylvania
Purchasing Card
Proxy/Secondary Card Holder Agreement**

**I, _____, hereby request to be a secondary cardholder for the
Purchasing Card assigned to _____ in the _____ Department.**

I will be replacing _____ as of _____

As a secondary card holder, I agree to comply with the following terms and conditions regarding my use of the card.

- I. I understand that I am being entrusted with a valuable tool - a Purchasing card - and will be making financial commitments on behalf of Slippery Rock University of Pennsylvania (hereinafter the "University") and will strive to obtain the best value for the University.

2. I understand that the University is liable to US Bank for all charges made on the card.

3. I agree to use this Card for approved purchases only and agree not to charge personal purchases. I understand that the University, State System of Higher Education, and/or Commonwealth of Pennsylvania authorities will audit the use of this Card and report and take appropriate action on any discrepancies.

4. I will follow the established procedures for the use of the Card. Failure to do so may result in either revocation of my use of privileges or other disciplinary actions, including discipline in accordance with the Employee Handbook, Collective Bargaining Agreements, and all applicable laws, regulations, and policies.

5. I have been provided a copy of the "Purchasing Card Policy & Procedures", Slippery Rock University of Pennsylvania, and I understand the requirements for the Card's use.

Employee Signature
(Proxy/Secondary Card Holder)

Date

Primary Card Holder Signature

Campus Phone Number

Organization (Org) Number(s)

Campus Location

Organization Manager Signature

Date

Card Administrator Signature

Date