



Commonwealth of Virginia Corporate Purchasing Card Employee Agreement

I, _____, acknowledge receipt of a Bank of America VISA Corporate Purchasing Card. As a Cardholder, I agree to comply with the following terms and conditions regarding my use of the Card.

- 1. I understand that I am being entrusted with a valuable purchasing tool and will be making financial commitments on behalf of my agency and will strive to obtain the best value for the agency by using State contracts and other "preferred suppliers" and mandatory state contracts as identified by the Agency's Purchasing Department.
2. I understand that my agency is liable to BOA VISA for all authorized 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 my agency will review the use of this Card and the related management reports 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 privileges or other disciplinary actions, including termination of employment.
5. I agree to return the Card immediately upon request or upon termination of employment (including retirement). Should there be any organizational change that causes my cost center to likewise change, I also agree to return my Card and arrange for a new one, if appropriate.
6. If the Card is lost or stolen, I agree to notify the Program Administrator and Bank of America immediately.
7. I understand that in order to properly purchase goods and services, I must use mandatory State Contracts and eVA for those purchases that qualify and record the PCO (Purchase Card Order) number on the purchasing log. For those goods and services excluded from eVA by Section 14.9.b of the Agency Procurement and Surplus Property Manual (APSPM) and purchased via the internet, not through eVA, the vendor must have a Secure Socket Layer (SSL) Version 2.0 or greater. To ensure the vendor has a SSL, the address window must start with https://. I will record the vendor's website address on the purchasing log.
8. I agree to not share my Card or Card number with anyone other than a vendor I am doing business with. I agree if I share my Card or Card number with anyone other than a vendor I am doing business with, my agency will take disciplinary action as a result.
9. I agree to successfully complete annual Cardholder training as well as sign a new Employee Agreement Form for each Card renewal period.

Employee Signature/Date _____

Agency and Cost Center _____

Supervisor's Signature/Date _____

Agency Address _____

Program Administrator's Signature/Date _____