

Custodian	OSU ID#
Account Manager	Banner Log In
Account Managers Backup / Business Manager	Banner Log In
Budget Authority (Chair/Director/Dean) / Banner Cardholder	OSU ID#

Bill to Address:

Purchasing Card #:	Name as Embossed on Card	
Expiration Date:	Credit Limit \$	Primary Billing Index:

OREGON STATE UNIVERSITY  
OREGON UNIVERSITY SYSTEM  
VISA PURCHASING CARD AGREEMENT

**1 DEPARTMENT BUDGET AUTHORITY (CHAIR/DIRECTOR/DEAN) RESPONSIBILITIES**

**a. VISA Card Acknowledgement:**

As the Department's Budget Authority, I accept responsibility for the VISA Purchasing Card listed above and agree to the stated credit limit. I have access to all associated policies and guidelines including the OUS Financial Administration Standard Operating Manual - FASOM <http://www.ous.edu/cont-div/fpm/> and the OSU Purchasing Card Program Policies and Procedures <http://oregonstate.edu/fa/businessaffairs/accountspayable/purchasingcard>. I understand the rules and guidelines for purchasing card use and recognize that inappropriate usage will result in the revocation or suspension of the departmental VISA Purchasing Card.

**b. Assign Custodian:**

- 1. As the Departmental Budget Authority, I have assigned the duties of card custodian to someone other than myself and I acknowledge the custodian, listed above as the person who has physical custody of the card.
- 2. I will retain physical custody of the Card myself and will ensure that it is kept in a secure location. The Custodian's duties listed below will be assigned TO SOMEONE OTHER THAN MYSELF. I will ensure that the Campus PCard Program Administrator in Payables is notified in the event of any custodial changes.

**c. Financial Responsibility:**

As the Department's Budget Authority I will approve expenditures, review all procurement card charges to determine appropriateness and review the monthly reconciliation of the card activity to the monthly statement. I will personally sign the monthly US Bank statement as approval.

**2 CUSTODIAN RESPONSIBILITIES**

**a. Designated Users:**

As Custodian, I may authorize other designated OSU employees as users of the PCard. I will ensure that all card users are aware of user responsibility and that each designated OSU employee has read and signed the PCard Designated User Agreement.

**b. Billing Disagreement or Adjustment:**

In the case of a billing dispute or adjustment that cannot be resolved with the vendor, the department will work directly with the bank online or by phone for resolution, within 60 days of the statement date. The bank will mail the necessary forms to the cardholder to file a written dispute.

**c. Credit Limit:**

Any charge made by the bank for exceeding the limit will be charged to my department.

**d. Accountability and Procedures:**

I will protect and control the VISA Purchasing Card at all times. I will retain physical custody of the card and will ensure that it is kept in a secure location, unless this responsibility has been assumed by the Department Budget Authority.

I may authorized other designated OSU employees within the department as users of the VISA card. I will not give the card number to anyone except authorized OSU employees who have signed the Designated User Agreement. User Agreements will be updated by the Department as users change, and copy forwarded to Business Affairs.

All Departmental and User Agreements will be updated annually in January and submitted to Business Affairs.

I will maintain a log for check out and check in of the card by purchasing card users, and to log transactions made. Logs must contain date of purchase, person who made the purchase, vendor name, what was purchased and the amount. The Custodian may use the Activity Log form available in OSCAR <https://oscar.oregonstate.edu/Resources/SubNav.aspx?NavPage=20&submenu=T20> , as Excel spreadsheet or other format as long as it contains the above information.

I ensure that proper documentation supporting card charges are obtained and monitor transactions for proper use. I will retain all backup documentation for the PCard for 6 years and when the VISA Purchasing Card is used with a Grant I will retain the backup documentation for 3 years after the ending date of the Grant.

**e. Loss, Theft or Fraud:**

If the card is lost or stolen or has a fraudulent charge I will immediately notify the PCard Program Administrator at 541-737-0650 and US Bank at 1-800-344-5696 press "\*" to speak directly to a customer representative.

**f. Card Ownership:**

I understand that the VISA Purchasing Card belongs to the Bank and I will surrender it immediately when notified either by the Bank or the OSU Payables Manager.

**3 ACCOUNT MANAGERS RESPONSIBILITIES**

**a. Monthly Duties:**

Transactions may be reviewed as they occur on the US Bank Online, Receipts are submitted and are reconciled to the monthly electronic online statement or the statement received by mail. Maintain either a paper copy or electronic copy of the monthly statement. If the original receipts should be needed for audit purposes, business Affairs will coordinate with auditors and obtain documents form the departments.

Distribute charges by Banner PCard Module (FAAINVT).

Submit to Business Affairs on a monthly basis a copy of the monthly bank statement that has been reconciled to the original receipts and signed by the Department Budget Authority.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
CUSTODIAN

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
ACCOUNT MANAGER

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
BUSINESS MANAGER / ACCOUNT MANAGER'S BACKUP

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
BUDGETARY AUTHORITY (CHAIR/DEAN/DIRECTOR)

Printed Name: \_\_\_\_\_