OFFICE OF THE CONTROLLER 5000 North Willamette Boulevard Portland, Oregon 97203-5798 (503) 943-8712 / Fax: (503) 943-7333



Cardholder User Agreement

You are being entrusted with a University of Portland WellsOne Commercial Card, issued by Wells Fargo Bank. The card is provided to you to purchase materials for the University of Portland. It is not an entitlement nor reflective of title or position. The card may be revoked at any time without your permission. Your signature below indicates that you have read and will comply with all of the terms of this agreement.

- 1. I understand that I will be making financial commitments on behalf of the University of Portland and will strive to obtain the best value for the University.
- 2. I will follow the University of Portland Purchasing and Travel & Entertainment policy and adhere to the Purchase Card Handbook. (These policies are available on the Controller's page of University web site.) Failure to comply with this Agreement will be considered as a misappropriation of University of Portland funds and may result in sanctions up to and including termination.
- 3. I understand that I am not to use the card to make personal purchases for myself or for others. Using the card for personal charges may be considered misappropriation of University of Portland funds and may result in termination of employment.
- 4. I agree that should I violate the terms of this Agreement and use the WellsOne Commercial Card for personal use or gain that I will reimburse the University of Portland for all incurred charges and any fees related to the collection of those charges.
- 5. The WellsOne Commercial Card is issued in my name. I will not allow any other person to use the card. I am responsible for any and all charges against the card.
- 6. The WellsOne Commercial Card is University property. As such, I understand that I may be periodically required to comply with internal control procedures (audits) designed to protect the University of Portland assets. This may include being asked to produce the card to validate its existence and account number.
- 7. If the card is lost or stolen, I will immediately notify Wells Fargo Bank by telephone at 800-932-0036 and pcard@up.edu.
- 8. I will receive a notification to go online to get my Online Expense Report, which will report all purchasing activity during the statement period. As I am responsible for all charges (but not for payment) on the card. I will reconcile the statement and resolve any discrepancies by either contacting the supplier or Wells Fargo Bank. I will attach all receipts as required and send a copy of the statement in the required envelope to the approver designated by the Office of the Controller.
- 9. I agree to surrender the WellsOne Commercial Card immediately upon termination of employment, whether for retirement, voluntary, or involuntary reasons.

Cardholder Name:	University ID#:
Title:	Card# (Last four digits):
Department:	
Cardholder Signature:	Date: