

THE PURCHASING CARD FORMS

FOR USE WITH THE JPMORGANCHASE VISA CARD

April 2009

Previous editions are obsolete

Here is a one-page summary of the purchasing card program, and a set of the following forms:

Basic Understandings

P-Card Manager Agreement

Cardholder Agreement

Cardholder Account Application

Guide for Completing the Cardholder Account Application

Purchasing Card Transaction Log

Dispute Process

Delegation of Use Letter Format

P-Card Limit Increase > than \$25,000

P-Card Increase or Payment for \$50,000 or greater

P-Card Statement Reconciliation Worksheet

To request a Purchasing Card, please submit the P-Card Manager Agreement, the Cardholder Agreement, and the Cardholder Account Application to the Purchasing Card Administrator at the following address. For your convenience, please note that all forms may be faxed rather than sent in Campus Mail.

Purchasing Card Administrator
Purchasing and Business Services
Arizona State University
PO Box 875212
Tempe, AZ 85287-5212

Mail Code 5212
Fax: 480-965-2234

Thanks for your interest in the Purchasing Card program.

THE PURCHASING CARD

Our world is changing, and fast. As customers, we have become addicted to speed. We want the things we need now! We have little patience for red tape or a bureaucratic run around. The increasing complexity of our lives demands that we spend our time on the big stuff; the little stuff better be able to take care of itself.

Our world in Purchasing and Business Services is also changing fast. We heard you when you said that you wanted an easy method of buying small dollar amounts of goods and services. In association with JPMorganChase, we have developed a Purchasing Card which will do exactly that.

The Purchasing Card is a corporate liability card. It is a way for you to spend money right out of your budget. From the University viewpoint, it works like a debit card. From a supplier's viewpoint, it is a Visa Card, and is processed like any other credit card.

The Purchasing Card delegates purchasing authority to you. You can get exactly what you want, when you want it, faster, and with a minimum of paperwork. If you are at a Radio Shack at 9:00 p.m. on a Friday night and find exactly the component that will complete your research project, then just use your Purchasing Card, and that component is yours!

The Purchasing Card also allows you to buy over the telephone or via fax. And you can use secure World Wide Web sites to buy from online catalogs.

- A. You can use the Purchasing Card to buy the things you would normally buy for your department. Naturally, the same restrictions that apply to other methods of purchasing also apply to the Purchasing Card. The normal dollar limit per transaction is \$5,000, (Note: this generic limit was increased from \$1,000 to \$5,000 in May 2003) but you can request a higher limit. Existing Card limits are not automatically increased; cardholders have to request an increase via e-mail. Please email: pcard@asu.edu

Here's the catch. In order to be delegated authority, you have to undertake some responsibility. Naturally, you have to protect the Purchasing Card, just as you protect your own credit cards. And you have to agree to use the Purchasing Card responsibly. And you have to retain the transaction records in your department in case an auditor wants to know exactly what you bought. Finally, you have to attach these transaction records to your monthly Memo Statement from Chase and submit them to the designated P-Card Manager in your department for review and approval. The designated P-Card Manager indicates approval by signing your monthly Memo Statement.

Purchasing Card transactions roll into Advantage to the appropriate Object/SubObject Code based on the classification of the supplier. For example, if you buy something from a computer supplier, the transaction will map to 7320 57, Computer Supplies. Similarly, if you buy something from an office supply company, the transaction will map to 7320 01, Office Supplies.

To get a copy of The Purchasing Card, A Guide for Users, please go to our address on the Web and click on The Purchasing Card. The address is <http://www.asu.edu/purchasing/stores/card/> on the Web. To apply for a Purchasing Card, please submit a Cardholder Agreement and a Cardholder Account Application. If there is not already a designated P-Card Manager for monitoring the Purchasing Card program in your department, please also have your department designate one and submit a P-Card Manager Agreement. If you have questions, please contact your Purchasing Card Administrators, **Riki Meier (965-7273) or Gail Horney (965-0658)**. Fax number is 480-965-2234.

Thanks for your interest in the Purchasing Card Program. BASIC UNDERSTANDINGS

The JPMorganChase Purchasing Card

In a mutual effort to provide a convenient method for faculty and staff to rapidly and easily make small dollar purchases, this document establishes the basic understandings between Purchasing and Business Services and the respective college, school, department, or office.

The Purchasing Card is the preferred method of making small dollar purchases.

Any college, school, department, or office may withdraw from the Purchasing Card program at any time.

Purchasing Cards are issued to individuals or departments only upon the approval of each Cardholder Agreement by a designated P-Card Manager in the department. The respective Vice-President, Dean, Director, Chair or designated P-Card Manager may withdraw such authorization for an individual at any time.

Purchasing Card transactions are posted to Advantage, the University's integrated financial management system.

Purchasing Cards are issued through and monitored by designated P-Card Managers. The Purchasing Card Administrator will work closely with your department designated P-Card Managers. Cardholders keep transaction records and attach them to their monthly Memo Statement from Chase and forward them to the designated P-Card Manager in their department for review and approval. These P-Card Managers indicate approval by signing the monthly Memo Statement.

The University is liable for all Purchasing Card transactions. In the event that a Cardholder overspends his or her budget, then that Cardholder's college, school, department, or office will resolve the over budget condition, normally by transferring in money from another account. The University does not maintain any central fund that is available to cover over budget expenditures.

The college, school, department, or office will encourage Cardholders to patronize small, woman-owned, and minority-owned businesses.

The vast majority of Purchasing Cards are issued to individuals. It is possible to obtain a department card. As there is no one individual who can be held accountable for a department card, the respective department should expect that they will pay for all transactions made on a department card. Further, department card transactions can be disputed only with the respective merchant, and not with Chase.

More information on how the Purchasing Card Program works may be found in The Purchasing Card: A Guide for Users at <http://www.asu.edu/purchasing/stores/card/> on the Purchasing and Business Services Web site.

Purchasing Card forms may be found at <http://www.asu.edu/purchasing/stores/card/> on the Purchasing and Business Services Web site.

P-Card MANAGER AGREEMENT

The JPMorganChase Purchasing Card

The Purchasing Card program delegates both authority and responsibility for small dollar purchases to front line people in your organization. They are, after all, in the best position to know what they need. Still, the University must be able to demonstrate to the public that we are spending our money wisely. While it is the respective vice-president, dean, chair, or director who has the overall responsibility for ensuring that the public is best served, the department designated P-Card Manager is the person who monitors the daily operation of the Purchasing Card program in each organization to ensure it can withstand the scrutiny of the press and the public. Your vice-president, dean, chair, or director has recognized you as a person of high integrity and sound judgement by agreeing to participate in the Purchasing Card program. This Agreement lists your primary responsibilities in the Purchasing Card program:

NEW

- To comply with the terms and conditions of this Agreement and of The Purchasing Card: A Guide for Users and as such Guide may be subsequently revised. I acknowledge that the Guide is available on the World Wide Web at <http://www.asu.edu/purchasing/stores/card> on the Purchasing and Business Services site. I understand that my organization is responsible for all Purchasing Card purchases made by the people in my organization. **I also understand that a fingerprint check is required and I will not approve new requests unless the background check has been completed for all new P-Card holders effective November 1st, 2005, per FIN 203.** Go to <http://www.asu.edu/hr/backgroundcheck.html> for more information.
- To promptly obtain and review the monthly Memo Statement and associated transaction records for cardholders in my area. If all transactions are appropriate, to indicate my review and approval by signing the monthly Memo Statement. I understand that these monthly Memo Statements are usually retained by the respective cardholder, but I may also choose to retain them myself. To also review the appropriate Purchasing Card transactions available on Advantage.
- To promptly report to the appropriate official any suspected misuse of the Purchasing Card. Such appropriate officials include but are not limited to: the leadership staff in my organization, the Purchasing Card Administrators, the Associate Vice President for Financial Services and Treasurer, or Internal Audit.
- To ensure that Cardholders promptly report any lost or stolen Purchasing Cards, and to ensure that Cardholders who are leaving employment at the University return their Purchasing Cards and notify one of the Purchasing Card Administrators to cancel these Cards.
- To require that the monthly Memo Statements and attached transaction documents be retained for five years.
- To assist reviewers and auditors in examining the Purchasing Card program.

DESIGNATED DEPARTMENT P-Card MANAGER:

Signature

Print Name

Date

_____/_____
Telephone/Fax Numbers

E-mail Address

Department Name

PURCHASING AND BUSINESS SERVICES:

Signature

Print Name

Date

Purchasing and Business Services

4/14/2009

CARDHOLDER AGREEMENT

The JPMorganChase Purchasing Card

In consideration of my responsibility to properly steward public resources, I agree to the following responsibilities:

- To comply with this Agreement and The Purchasing Card: A Guide for Users as such Guide may be subsequently revised. I acknowledge that the Guide is at <http://www.asu.edu/purchasing/stores/card> on the Purchasing and Business Services Web site. I have read and understand it.
- To protect and safeguard the Purchasing Card per this Agreement and the Guide.
- To purchase ethically, fairly, and without conflict of interest; to seek the best value; and to support the development of small, woman-owned, and minority-owned businesses in my use of the Card.
- When using Federal funds, to purchase only necessary items, to determine that the price is fair and reasonable by comparing alternative sources, and to avoid firms or individuals who respond that they are prohibited from contracting with the Federal Government.
- To retain all transaction records, attach them to the monthly Memo Statement from Chase, and to submit these Memo Statements and attached transaction records to the designated P-Card Manager in my department for review and approval. This approval is indicated by the designated P-Card Manager's signature.
- To retain or cause to be retained the monthly Memo Statements and transaction documents for five years.

I further understand that my improper use of this corporate liability card may result in disciplinary action against me. Effective November 1, 2005 **I also understand that I may be required to have a fingerprint check before being issued a Purchasing Card.** Should I fail to use this Purchasing Card properly, I authorize Arizona State University to deduct from my salary or from any other amounts payable to me, an amount equal to the total of the improper purchases. I also agree to allow Arizona State University to collect any amounts owed by me even if I am no longer employed by the University. If Arizona State University initiates legal proceedings to recover amounts owed by me under this Agreement, I agree to pay legal fees incurred by the University in such proceedings. I understand that the University may terminate my privilege to use the Purchasing Card at any time for any reason. I will return the Purchasing Card to the University immediately upon request or termination of employment.

CARDHOLDER:

PURCHASING AND BUSINESS SERVICES:

Signature

Signature

Print Name

Print Name

Date

Date

I authorize this applicant to have a Purchasing Card and spend University funds.

I hereby acknowledge receipt of Purchasing Card:

Signature of designated **P-Card Manager**

Cardholder Signature

Print Name

Date

Date

Department Name

Purchasing and Business Services

4/14/2009

CARDHOLDER ACCOUNT APPLICATION

New
 Change (*Only complete fields to be changed*)
 Delete/Close

Cardholder Account # _____ - _____ - _____ - _____

Cardholder Information

Cardholder Name: _____
(First Name) (Middle Initial) (Last Name)

Agency Organization:

University Department Name:

PO Box Number (or Street Address):

City: _____ State: _____ Zip+4: _____

E-Mail Address:

Work Phone: _____ Fax Phone: _____

Date of Birth:

ASU Affiliate # - found on your ASU Sun Card (100xxxxxxx):

Mother's Maiden Name or another Password you will not forget:

Accounting Code: (***please print clearly –example is it an "S" or a "5"***)

_____ - _____ - _____ - _____ - _____
(Fund) (Agency) (Organization) (Suborg) (Optional Default Object Subobject)

Card Controls

Monthly Purchase Limit: \$ _____

Daily Purchase Limit: \$ _____

Single Purchase Limit: \$ _____

Transactions Per Month: _____

Transactions Per Day: _____

Remarks:

Department Approvals

Cardholder:
 (Please Print) _____ Signature _____ Date: _____

P-Card Manager:
 (Please Print) _____ Signature _____ Date: _____

Purchasing Use Only

Level 6 Name _____ Level 6 Number _____

Report Hierarchy Level Numbers	Level 2	Level 3	Level 4	Level 5
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GUIDE FOR COMPLETING THE CARDHOLDER ACCOUNT APPLICATION

(This form is for departmental use only)

This is easier than it looks. Instructions on completing each section of the form follow the description of that section.

_____ New
_____ Change (*Only complete fields to be changed*)
_____ Delete/Close Cardholder Account # _____ - _____ - _____ - _____

Check **New** for a new card application, **Change** to make changes to an existing Purchasing Card, or **Delete/Close** to cancel an existing Purchasing Card. Enter your Purchasing Card number for existing Purchasing Cards.

Cardholder Name:

Enter the name you want to appear on the Purchasing Card.

Agency Organization: _____

Enter the Agency/Org to which the card is tied. For example: "CG1 1001". This account is also printed on the Purchasing Card and is very convenient if you have more than one Purchasing Card as it allows you to easily identify the Agency/Org for the Card.

PO Box Number (or Street Address):

City: _____ State: _____ Zip+4: _____

Enter the University address to which you want Purchasing Card statements sent. We do not send Purchasing Card statements to home addresses. **PO Box Number (or Street Address)** almost always contains "PO Box 87XXXX" where XXXX is the last four digits of your Zip+4. For example: **PO Box Number (or Street Address)** for Purchasing is "PO Box 870401". The **City** is almost always Tempe for PO Box addresses. The **Zip+4** is usually "85287-XXXX" where XXXX is your department Mail Code. For example: the Zip+4 for Purchasing is 85287-0401. If your department has a street address, you may use that.

E-Mail Address:

Work Phone: _____ Fax Phone: _____

Date of Birth: _____

ASU Affiliate Number (10 digit # found on your ASU Sun Card 10... or 12...):

Mother's Maiden Name or another Password: _____

Enter the above information for the person for whom the Purchasing Card is or will be issued. Purchasing Cards sent in the mail cannot be used until the cardholder activates it. Date of Birth, Social Security Number, and Mother's Maiden Name or another Password is used in the activation process to ensure that the card is received by the intended cardholder. You do not need to provide your Social Security Number, you may provide any nine-digit number. But, you will be asked for this number when you activate your card, so be sure to make a note of the number you used.

Accounting Code: _____
(Fund) (Agency) (Organization) (SubOrg) (Default Object SubObject)

Enter the Advantage Fund, Agency, Organization to which the Purchasing Card will be tied. Enter the Suborg if you use SubOrgs. Your department business manager can provide this information. For almost all cards, you do not have to enter the default Object SubObject codes as the mapper will enter the appropriate code for each transaction. The two notable exceptions are: for Food Only cards, enter 739006, and for Library cards that are for buying library materials, enter 781069.

Monthly Purchase Limit: \$

The normal limit is \$10,000. This is the most you can spend in one month. If you need a limit either higher or lower than this, please justify it in the Remarks section.

Daily Purchase Limit: \$

The normal limit is \$10,000. This is the most you can spend in one day. If you need a limit either higher or lower than this, please justify it in the Remarks section.

Single Purchase Limit: \$

The normal limit is \$5,000. This is the most you can spend in one transaction. If you need a limit either higher or lower than this, please justify it in the Remarks section.

Transactions Per Month:

The normal limit is 75. This is the most times you can use the Card in one month. If you need a limit either higher or lower than this, please justify it in the Remarks section.

Transactions Per Day:

The normal limit is 10. This is the most times you can use the Card in one day. If you need a limit either higher or lower than this, please justify it in the Remarks section.

Remarks:

Tell us here anything you want us to know. Enter "Food Only" or "Library Materials" if you want one of these specific types of Card. Justify here any higher or lower limits than the standard.

Department Approvals

Cardholder:
(Please Print) _____ Signature _____ Date: _____

P-Card Manager:
(Please Print) _____ Signature _____ Date: _____

The Cardholder and the P-Card Manager designated to monitor the Purchasing Card in your department complete the above section.

That's it. You are done!

You may fax your completed forms to Purchasing and Business Services at 480-965-2234 or mail through campus mail to MC 5212.

DISPUTE PROCESS

First, please contact the supplier and try to resolve the difficulty. If this fails, then:

Please call the JPMorganChase Customer Service Representatives at 1-800-270-7760

Based on the information you provide to them, they will fax you the appropriate form to initiate the dispute.

Delegation to Use Form

To: (Supplier Name) _____

From: (CardHolder Name) _____

Date: _____

Subject: Delegation to Use the ASU Purchasing Card

The designated individual(s) listed below is (are) hereby delegated to use the ASU Purchasing Card No. _____ issued to me. I understand that I am responsible for any charges made on this card.

If I may answer any questions, please call me at _____.

Designated Individual(s)

Print Name

Signature

Print Name

Signature

Print Name

Signature

Sincerely,

Print Cardholder Name

Signature



**P-Card Single Transaction Request
For \$25,000 and Greater**

Card Holder Name:		
Card Number:		
ASU Department:		
Agency/Org:		
Per Transaction Limit Increase Requested:		
<input type="checkbox"/> I have read, understood and complied with the bid/proposal process for procurements costing more than \$15,000 per www.asu.edu/aad/manuals/pur/index.html PUR 305-01 & PUR 305-02 <input type="checkbox"/> The State of Arizona or ASU already has a contract in place for this procurement.		
<input type="checkbox"/> Permanent Increase <input type="checkbox"/> Temporary Increase est. date of purchase ____ / ____ / ____	Temporary single transaction increases will be in effect through estimated date of purchase. Monthly increases will be in effect through month-end unless otherwise directed.	
Purpose:		
CardHolder Name (Print)	Signature	Date
CardHolder E-Mail	CardHolder Fax Number	
Dean/Director name (Print)	Signature	Date
For Financial Services Only		
Purchasing		Date
VP Name	Signature	Date
Financial Services		Date
Sponsored Projects (Required if Sponsored Account)		Date

SEND COMPLETED REQUEST TO PURCHASING
 FAX 5-2234, MAIL CODE 5212, ATTN: Riki Meier / Gail Horney
 For questions, contact Riki Meier (5-7273) or Gail Horney (5-0658)



Arizona State University

P-Card Increase or Payment for \$50,000 and Greater Notification

Date _____

Cardholder Name:	
Card Number:	
ASU Department:	
Agency/Org:	

This serves as notification that your P-Card limit per transaction has been increased to \$ _____ pending approval of this signed Form.

When processing a P-Card payment for \$50,000 or greater, you will be required to obtain prior approval from Financial Services:

- Attach the quote or other documentation when submitting the increase request.
- Financial Services will sign off on the documentation provided and return to department for processing.
- Department can process P-Card payment after Financial Services approval has been returned.
- Department maintains approved documentation in departmental P-Card records.

This procedure is consistent with the university's check signing approval process, approved by the President, where checks (disbursements) \$50,000 or more require a second review and signature.

Failure to comply with this approval process for payments of \$50,000 and greater will be cause for reducing cardholder's P-Card limit to the limit of \$1,000 per transaction.

I have read the procedures for processing P-Card transactions of \$50,000 and greater and agree to abide by the established procedures.

Signature of Card Holder	Date
For Financial Services Only	
Purchasing	Date
VP Name Signature	Date
Financial Services	Date
Financial Services	Date
Sponsored Projects (Required if Sponsored Account)	Date

**RETURN THIS FORM TO THE PURCHASING DEPARTMENT,
FAX 5-2234, MAIL CODE 5212, ATTN: RIKI MEIER / GAIL HORNEY**

Limit change will become effective upon receipt by Financial Services. For questions, contact Riki Meier (5-7273) or Gail Horney (5-0658)

**P-CARD STATEMENT RECONCILIATION
WORKSHEET**

Department		Cardholder Name	
Advantage Account #		Last 4 # of Card	
PI Name (Grant Accounts)		P-Card Manager/3 rd Party Name	

Items to be Considered with Reconciliation

- Monthly Memo Statement
- Receipt/Invoices/Registration Forms/etc that provide record of purchase
- Forms & additional back up information, i.e.
 - Business Meals and Related Expenses Form (FIN 420-02)
 - Itemized receipts are required for P-Card purchases (specifically listed in the P-Card "A Guide for Users")
 - Meals over \$40/person require VP approval
 - NO Alcohol
 - Travel document information (i.e. copy of travel form with authorized signature or TE #) for airfare and conference/workshop registrations
- FIN, PUR, & other university/college/departments policies and procedures are followed, i.e.
 - Cell Phone policy (FIN 420-06)
 - Prohibited Items (FIN 401-03 & P-Card specific listed in the P-Card "A Guide for Users")
 - Printing (PUR 402-04)

Segregation of Duties and Third Party Review

In order to maintain the appropriate oversight of purchasing card transactions, cardholders **must** timely submit their monthly Memo Statements and the associated transaction documents to a designated third party in their departments for review and approval. While it is possible for a person to be both the designated manager and a cardholder, it is not allowable for that designated manager to review and approve transactions he or she made.

I have reviewed the monthly memo statement and back up documentation for the listed statement period. Any items not attached have been identified below.

All Items Reconciled: Yes No (please fill out the chart below)*

Missing Documentation:	Initial & Date, if found

Notification of missing documentation: Yes No

Contact		Date	
Method			

* If a receipt is missing and a duplicate receipt cannot be obtained from the vendor, contact the Purchasing Dept for a Missing Receipts Form which will serve as a substitute receipt.

Notes:

Statement Period:	
Cardholder Signature:	Date:
P-Card Manager or 3 rd Party Signature:	Date: