

*Your participation in the Travel Card Program is a convenience that carries responsibilities. Continued use of this card is contingent on your adherence to the Travel Guidelines set forth by **University Policy 3356-3-05 Travel on Behalf of the University**. Therefore it is vital that you read each statement below carefully to ensure that you fully understand the program's key policies. Other important details can be obtained on the Travel Services web page.*

1. Although the card is issued in my name, it is the property of YSU and can be revoked at any time, for any reason.
2. Knowledge of and compliance with the Travel Guidelines is solely my responsibility.
3. Violations of the Travel Guidelines could result in my card and travel privileges being revoked, personal financial liability, and disciplinary action.
4. I am the only person authorized to use this card and I will NOT share the card with ANYONE.
5. Because all charges are billed directly to and paid directly by the university, any personal charges I make on the card could be considered misappropriation of YSU funds, since I cannot pay the bank directly.
6. My transaction limit is \$ \_\_\_\_\_ and my monthly limit is \$ \_\_\_\_\_.
7. I will comply with internal control procedures that are designed to protect university assets. This includes obtaining documented approval in Concur before traveling, retaining receipts for all transactions, and submitting travel expense reports on a timely basis in Concur.
8. I will report any discrepancies I find between my receipts and billed charges in Concur to the PCard Program Administrator at (330) 941-3166.
9. I will report a lost or stolen card immediately to JPMorgan Chase at 1(800)-270-7760 and to the PCard Program Administrator at (330) 941-3166.
10. I will surrender my card to my financial manager or Procurement Services when transferring out of my current department or upon termination of my employment at Youngstown State University.

*By signing below, I acknowledge receipt of a travel card and I understand and agree to the terms and conditions of this program.*

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Cardholder Signature

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Date

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Department

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Last 4 Digits of Card Number