Appendix:

VISA CARD EMPLOYEE ACKNOWLEDGMENT

This document outlines the responsibilities I have as a holder of a Durham District School Board Royal Bank VISA Card . My signature indicates that I have read and understood these responsibilities, and agree to adhere to the policies and procedures established for the program.

1. The purchase card is intended to facilitate the purchase and payment of materials and services required to conduct Durham District School Board business. **I will not use the card for any personal purchases.**

2. Unauthorized use of the card can be considered misappropriation of funds. Unauthorized use of the card will result in immediate forfeiture of the card.

3. I understand that the card must be surrendered upon termination of employment. I may also be requested to surrender the card for reasons not related to my own personal situation. I may also be asked to temporarily return the card where I am on an extended leave of absence.

4. I will maintain the card with appropriate security whenever and where ever I may use the card. If the card is lost or stolen, I agree to notify the Manager of Accounting immediately. I further understand that failure to report a stolen/lost card promptly could result in my being responsible for the first $50.00 of fraudulent charges.

5. The Durham District School Board VISA Card is issued in my name. I will not allow any other person to use my card.

6. I understand that since the Board is responsible for payment and I am required to comply with internal control procedures designed to protect the organization assets. This includes writing on the back of the receipt the purpose and if for hospitality, the names of the individuals entertained.

7. I understand that the Board will receive a monthly statement that will report all activity during the most recent cycle. I will be required to obtain the original detailed cash register receipts and when using the internet to either purchase an item or register for a conference, workshop etc. a printed copy of confirmation is required. For purchases made over the telephone e.g. reference materials, an invoice from the company is required stating the item is paid. Please indicate the general ledger account number to be charged and forward the receipts to the Administrative Assistant of the Superintendent of Business.

8. I understand that all charges will be billed directly to and paid directly by the Board. I understand that Royal Bank cannot accept payment from me directly.

9. I understand that the charges made against my card are automatically recorded against the appropriate budget as specified by management. I agree to charge only those purchases consistent with the type of materials and services authorized by the Board.

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Employee Signature Date

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Employee Name (Please Print)