

T-CARD EMPLOYEE AGREEMENT

Cardl	holder Name (full, legal):	Wo	rkdayID#:	
Depa	ortment:			
Office Phone #:		Email Address:		
the fo	an authorized and approved T-Card cardho ollowing terms and conditions regarding th			
	s) entrusted to me:			
1.	. I accept full personal responsibility for the safekeeping of all P-Cards assigned to me and that no one, other			
_	than myself, is permitted to use the T-Card assigned to me for any reason.			
2.	· · · · · · · · · · · · · · · · · · ·			
2	endeavor to obtain fair and reasonable prices.			
3.	i G			
1	future procedures established. I will not use the T-Card for non-UA Little Rock official business and unauthorized or personal purchases.			
4. 5.	I will immediately report the theft or loss of the T-Card or fraudulent transactions to Bank of America by			
٥.	phone at 888-449-2273, my supervisor, and the UA Little Rock Credit Card Facilitator, 501-916-5727.			
6.				
٠.	another department within UA Little Rock; or (c) request of my supervisor or the UA Little Rock Credit Card			
	Facilitator.	N, 61 (6) 164 4650 51 111, 54 pc. 1150 61 1112	JA LICE HOOK C. Ca. Ca.	
	 Further, I understand that my last paycheck will be withheld until the T-Card(s) are properly surrendered, as required. 			
7.				
	for payments, possible discrepancies, and appropriateness of purchase.			
8.	1 1 1			
	receipts, and submitting them per the UA			
9.	,			
	the T-Card in any manner may result in: (a) revocation of the privilege to use the T-Card; (b) disciplinary			
	action; or (c) termination of employment and/or criminal charges being filed with the appropriate			
	authority.			
Em	ployee/Cardholder (printed - full legal name)	Employee (signature - full legal name)	Date	
	,			
Аррі	roved by:			
• •	,			
	nployee Manager (printed name)	Employee Manager (days)	. ————————————————————————————————————	
LII	ipioyee ivianagei (printed name)	Employee Manager (signature)	Date	
Dean or Dept. Head (printed name)		Dean or Dept. Head (signature)	. ————————————————————————————————————	
Deali		Dean of Dept. Head (signature)	Date	
G	ierald Ganz, Jr.			
Vice Chancellor for Finance & Admin.		Vice Chancellor for Finance & Admin.	Date	
(printed name)		(signature)		
	•	,		
Cre	edit Card Facilitator (printed name)	Credit Card Facilitator (signature)	Date	