

**SERIES 600  
FISCAL MANAGEMENT**

673.1 Administrative Exhibit

**EMPLOYEE CREDIT CARD USE AGREEMENT**

I, (employee name) \_\_\_\_\_ agree to comply with the following terms and conditions regarding my use of the District credit card:

1. I understand that I will be making financial commitments on behalf of the Marshall Public School District and will strive to obtain the best value for the District.
2. I understand that the District is liable to pay for all charges made on the card.
3. I agree to use this card for approved purchases only and agree not to charge personal purchases. I understand that the Business Manager will audit the use of this card and report and take appropriate action on any discrepancies.
4. I will follow the established procedures for the use of the card. Failure to do so may result in either revocation of my use of privileges or other disciplinary actions up to and including discharge.
5. I have been given a copy of the Credit Card Use policy and procedures and understand the requirements for the card use.
6. I agree to return the card immediately upon use.
7. If the card is lost or stolen, I agree to notify the Business Office and bank or credit card company immediately.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department

Date of Adoption:     December 17, 2008

Date of Revision: