

Cardholder User Agreement

You are being entrusted with a *Nebraska Wesleyan University* WellsOne Commercial Card, issued by Wells Fargo Bank. The card is provided to you to purchase materials and T&E expenses for *Nebraska Wesleyan University*. It is not an entitlement nor reflective of title or position. The card may be revoked at any time without your permission. Your signature below indicates that you have read and will comply with all of the terms of this agreement.

1. I understand that I will be making financial commitments on behalf of *Nebraska Wesleyan University* and will strive to obtain the best value for the company.
2. I have read and will follow the *Nebraska Wesleyan University* Commercial Card Policy (A copy of these policies will be e-mailed to you; please ask if you have not received it). Failure to comply with this Agreement will be considered as a misappropriation of *Nebraska Wesleyan University* funds and may result in sanctions up to and including termination.
3. I understand that under no circumstances will I use the card to make personal purchases for myself or for others. Using the card for personal charges will be considered misappropriation of *Nebraska Wesleyan University* funds and may result in termination of employment.
4. I understand, when legally possible, that I must assure that no state sales tax is charged when using the WellsOne Commercial Card. If any sales tax is charged, the user will be required to return to the vendor and get a new invoice with the sales tax removed. Failure to follow this requirement will result in the loss of the use of the card.
5. I agree that should I violate the terms of this Agreement and use the WellsOne Commercial Card for personal use or gain that I will reimburse *Nebraska Wesleyan University* for all incurred charges and any fees related to the collection of those charges.
6. The WellsOne Commercial Card is issued in my name (see next section for department cards). I will not allow any other person to use the card. I am responsible for any and all charges against the card.
7. If this is a department card, I understand I am responsible for all charges to this card and will maintain control of the card and be responsible for all aspects of its use.
8. The WellsOne Commercial Card is Company property. As such, I understand that I may be periodically required to comply with internal control procedures designed to protect *Nebraska Wesleyan University* assets. This may include being asked to produce the card to validate its existence and account number.
9. **If the card is lost or stolen, I will immediately notify Wells Fargo Bank by telephone at 800-932-0036 and the Business Office at 465-7527.**
10. I will receive a notification to go online to get my Online Expense Report, which will report all purchasing activity during the statement period. As I am responsible for all charges (but not for payment) on the card. I will reconcile the statement and resolve any discrepancies by either contacting the supplier or Wells Fargo Bank. **I will attach all receipts as required and send a copy of the statement to my Authorized Approver.**
11. If I wish to be reimbursed for out of pocket expenses (like mileage, and on-street parking) electronically, I will complete my profile on-line, (I understand that I am the only one who can see this information) and hereby give *Nebraska Wesleyan University* permission to automatically debit or credit my account.
12. I agree to surrender the WellsOne Commercial Card immediately upon termination of employment, whether for retirement, voluntary, or involuntary reasons.

Employee Name (Print)

WellsOne Commercial Card Account Number

Employee Signature

Date