



PURCHASING CARD APPLICATION

PLEASE COMPLETE BOTH SECTIONS

SECTION 1 – CARD HOLDER INFORMATION & AGREEMENT

Project Account # _____

Card Amount Requested _____

First Name _____

Middle Initial _____

Last Name _____

Business Address _____

City _____

State _____

Zip _____

(____) _____
Home Phone

(____) _____
Business Phone

Mother's Maiden Name _____

Social Security Number _____

E-mail Address _____

Date of Birth (Month/Year) _____

I am aware that the JPMorgan Purchase Card Statement, receipts and supporting documentation for all purchases must be submitted to the Research Foundation within 30 days of receipt of the JPMorgan Purchase Card Statement.

In addition, I am aware that failure to submit all JPMorgan Purchase Card Statements and receipts will result in the suspension or termination of the Research Foundation's purchase card.

Cardholder/Applicant's Name _____

Signature _____

Date _____

SECTION 2 – PRINCIPAL INVESTIGATOR AND GRANTS OFFICER SIGNATURES

Signature of Principal Investigator/Date
(if not the applicant) _____

Grant's Officer Signature/ Date _____

**RESEARCH FOUNDATION
OF THE CITY UNIVERSITY OF NEW YORK**

PURCHASING CARDHOLDER AGREEMENT

I (name) _____, as the cardholder, agree to the following conditions regarding my use of the Research Foundation Purchasing Card (P-Card):

- ✍✍ I agree to use the P-Card only for authorized purchases for the grant or contract to which it is attached and within the restrictions for that account.
- ✍✍ I understand that should I make an unauthorized purchase with the P-Card or use the P-Card in an inappropriate manner, I will be personally liable for the charge(s) and will relinquish the P-Card.
- ✍✍ I understand the Research Foundation monitors and audits my use of the P-Card.
- ✍✍ I agree to return the P-Card to an authorized Research Foundation representative, at the request of the Research Foundation, or upon termination of my employment.
- ✍✍ I have read the Research Foundation's Fact Sheet on the use of the P-Card and will abide by all the requirements.
- ✍✍ I understand that the P-Card cannot be used for alcoholic beverages, individual food and travel expenses (other than transportation), and gasoline, or for equipment and other single transactions of \$5,000 or greater. If the card is used for transportation charges, a completed Travel Expense Form must accompany the P-Card statement.
- ✍✍ I agree to submit monthly statements with supporting documentation by the end of the month in which the statement is received. I understand that if any statements are outstanding for 60 days or more, my P-Card privileges may be suspended or revoked.

My signature below indicates that I have read this agreement, understand and agree to be bound by it, and any subsequent amendments or addenda, as an authorized user of the P-Card from the Research Foundation of The City University of New York.

Cardholder's Signature _____ Date _____

Cardholder's Name (please print) _____

Project Investigator/Director (if not cardholder) _____

Grants Officer's Signature _____ Date _____