**EMPLOYER CREDIT CARD AGREEMENT WITH EMPLOYEE**

You have been granted the privilege of having a COMPANY NAME credit card with which to use for business related purchases and payments. Your participation in the credit card program is a convenience that carries responsibilities along with it. Although this card is issued in your name along with COMPANY NAME’s name, it is COMPANY NAME property and must be used with good judgment. **By signing this agreement, you acknowledge that you understand and will comply with all of the terms and conditions as listed below.**

I, as an authorized and approved cardholder have read and fully understand and agree to the following terms and conditions regarding the use and safekeeping of the credit card entrusted to me:

1. I accept full personal responsibility for the safekeeping of the credit card assigned to me and that absolutely no one, without the express permission of COMPANY NAME, is permitted to use the credit card assigned to me.
2. I will be making financial commitments on behalf of the COMPANY NAME and will obtain fair and reasonable prices**.**
3. I will submit all receipts promptly and substantiate all expenses incurred using the credit card.
4. When I use my credit card, I understand that these purchases will result in a “receivable” against me and I am responsible for repayment of any of these charges deemed not allowable by COMPANY NAME management. I further understand that any unallowable amount must be repaid to COMPANY NAME within 30 days after COMPANY NAME has received the month end credit card statement.
5. In the event that I fail to repay any non-allowable amount, COMPANY NAME is authorized to withhold the full amount from any payment (s) due me from COMPANY NAME, including payroll checks and expense reimbursement checks, as repayment. I understand that failure to follow these provisions more than once within any 12 month period may result in suspension of my credit card.
6. I will not use the Credit card for non-COMPANY NAME related expenses, unauthorized purchases or for personal purchases.
7. I will immediately report the theft or loss of my credit card to Todd Dlugos, CFO at COMPANY NAME.
8. I understand that I cannot use the credit card as a financial reference to obtain personal credit cards or loans.
9. I understand that I am personally responsible for obtaining ALL original detailed receipts (purchase and credit documents) and submitting them in accordance with COMPANY NAME credit card procedures, for those purchases where a receipt is required.
10. I understand that any purchases made by me will be recorded and reviewed in management reports to ensure compliance with these credit card terms and conditions.
11. I understand that failure to follow any of the above listed terms and conditions or if found to have misused the credit card in any manner may result in:
* Revocation of the privilege to use the credit card;
* Disciplinary action; and/or
* Termination of employment and/or criminal charges being filed with the appropriate authority.
1. I agree to surrender the credit card immediately upon request or upon termination of employment for any reason.

I hereby accept the above terms and conditions and acknowledge receipt of the credit card bearing number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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Date Employee Name

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Employee Signature