UNIVERSITY OF WYOMING DEPARTMENT TRAVEL CARD MANAGER AGREEMENT (Please type or print legibly)

College/Department Name	Travel Card Manager	Work Phone Number	E-mail Address
	Travel Card Manager	Work Phone Number	E-mail Address
Jame of person card will be assigned o in WyoCloud (can be same as Coord		hone # EmplID	Email address

Cardholder Statement Address: Dept Number, Street Address, City, State, Zip Code

The Department Travel Card Manager agrees to accept responsibility for the protection and proper use of the University of Wyoming Procurement Card in accordance with the terms and conditions below:

- 1. Department Travel Card Manager agrees to provide the supporting receipts from the vendor for each transaction as designated under university policies and procedures. Failure to report or document any purchase may be deemed an improper use of the Department Travel Card.
- 2. If the card number is stolen or misplace the Department Travel Card Manager shall immediately notify Procurement Services, 307-766-5233, or UMB Bank (after normal UW Business hours (800-821-5184, 888-494-5141 or 816-843-2000). Bank representatives are available 24 hours a day. Advise the representative that the call is regarding a Procurement Card If canceled through the bank the Cardholder must contact Procurement Services (307-766-5233) to notify them of the cancellation.
 - A Program Administrator will then authorize the bank to issue replacement travel card information. Card information that is subsequently found by the Travel Card Manager after being reported lost shall be destroyed.
- 3. THE DEPARTMENT TRAVEL CARD MANAGER MAY NOT MAKE PERSONAL PURCHASES ON THE CARD. The Department Travel Card Manager understands that he/she shall be personally liable for their own unauthorized personal use of the University of Wyoming Department Travel Card and agrees to obtain a direct credit from the vendor for the improper charge to the Department Travel Card and make payment via another payment source. Travelers are responsible for reviewing and verifying travel arrangements made by the Department Travel Card Manager. The Department Travel Card Manager understands that his/her improper use of the Department Travel Card may be cause for disciplinary action by the University, including termination, and that improper use of the Department Travel Card may subject Department Travel Card Manager to criminal prosecution. Department Travel Card Manager understands that the university may withhold amounts attributable to improper use by the Department Travel Card Manager from any paycheck or other University of Wyoming check which may be payable to the Department Travel Card Manager.
- 4. The Department Travel Card Manager understands that should his/her employment with his/her current College/Department terminate for any reason, the Department Travel Card number and purchase documents must be returned to the Department Head The Department Travel Card Manager understands that the university may withhold his/her final paycheck until the Department Travel Card is returned. The Department Travel Card Manager also understands that university may withdraw authorization to use the Department Travel Card and require the return of the Department Travel Card at any time for any reason.
- 5. The Department Travel Card Manager understands that the department travel card is only used to purchase airline, shuttle, bus and train tickets and to reserve and pay for hotel rooms for official university travel. All purchases must comply with university policies and regulations, and policies including all policies the Cardholder's College/Department implements in the use of the Department Travel Card.
- 6. The Department Travel Card Manager acknowledges by his/her signature to this agreement, that he/she has received training in the proper use of the Department Travel Card; has received, read and understands the Department Travel Card Procedures; and has read and understands this agreement.

CARD AUTHORIZATION PLAN TO BE COMPLETED BY PROCUREMENT SERVICES Authorization Strategy Number _____ (to be filled out by University Program Administrator) APPROVAL SIGNATURE: PRESIDENT, VICE PRESIDENT, DEAN, DIRECTOR, OR DEPARTMENT HEAD Print Name: ______ Title: ______ Signature: _____ Date: UNIVERSITY PROGRAM ADMINISTRATOR APPROVAL (PROCUREMENT SERVICES USE ONLY) Signature: ______ Date:_____ TRAVEL CARD MANAGER SIGNATURE DO NOT SIGN UNTIL TRAINING HAS BEEN COMPLETED Travel Card Manager Signature: ________Date: Card Expiration Date: _____