

**MARYLAND JUDICIARY PURCHASING CARD PROGRAM
CARDHOLDER AGREEMENT**

I, _____, hereby request a Corporate Purchasing Card. As a cardholder, I agree to comply with the following terms and conditions related to the use of the card:

1. I understand that I am being delegated the authority to purchase supplies and services on behalf of the Maryland Judiciary, using the Maryland Judiciary Corporate Purchasing Card.
2. I agree that this card will be used for approved purchases only and, further that I will not charge any personal purchases to this card. All purchases must be made in accordance with applicable laws and regulations. All purchases must comply with the Maryland Judiciary Procurement Policy and the Maryland Judiciary Corporate Purchasing Card Cardholder’s Guide. I understand that my failure to follow established procedures may result in disciplinary actions against me, including loss of time, suspension and/or termination of employment, fine, and/or criminal prosecution.
3. I agree to return the card immediately upon suspension and/or termination (including retirement) or upon reassignment to another Agency or cost center. Also, I agree to return the card immediately upon request of my supervisor and that disciplinary actions referred to in paragraph 2 would also apply for failure to do so.
4. If the card is lost or stolen, I agree to immediately notify USBank (800-344-5696) and the Purchasing Card Program Administrator (PCPA).

STATEMENT OF COMPLIANCE

I certify that I shall purchase supplies or services in accordance with applicable Maryland Judiciary Procurement Policy and Maryland Judiciary Corporate Purchasing Card Cardholder’s Guide procedures. I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith, and subject to Maryland Judiciary Regulations and all other applicable laws and regulations.

I further acknowledge and certify that I shall be personally responsible for any unauthorized Corporate Purchasing Card purchase. I hereby authorize the Judiciary to deduct from my payroll check and from any other payments to me the amount of such unauthorized purchases made on the Corporate Purchasing Card issued to me.

Employee’s Signature/Date

Accounting Code Number (PCA)

Employee’s ID Number

Employee’s Dept. /Jurisdiction

Employee’s Office Address

Employee’s Office Phone Number

Employee’s Email Address

Manager/Dept. Head’s Signature/Date

DC Chief Clerk’s Signature/Date
(Required for DC Employee’s Only)

State Court Administrator/Deputy State
Court Administrator’s Signature/Date

Purchasing Card Program Manager’s (PCPM)
Signature/Date