## University of Alaska Individual Travel Cardholder Agreement

As an Employee participating in the University of Alaska (UA) Travel Card Program with *JPMorganChase*, I agree to the conditions set forth below:

- The UA Travel Card will be issued in my name. The card is not transferable and may not be used by anyone other than me.
- By accepting the Card, I assume responsibility for the Card and will be responsible for and pay all charges made with the Card.
- I will use the Travel Card for business expenditures only. I understand that the Card is not be to be used as a personal line of credit and that misuse or fraudulent use of the Card may result in disciplinary action, up to and including dismissal from employment. I understand that misuse and fraudulent use includes purchases and cash advances that are non-business related as well as carrying an unpaid balance beyond 60 days that is not authorized by the Travel Card Administrator.

<u>I understand that all charges will be billed to and paid directly by me.</u> Monthly I will receive a statement from the provider listing activity associated with the Card. This activity will include purchases and credits made during the reporting period. A cash advance fee equal to 2.5% (\$3.00 minimum) of the transaction amount will be charged for each cash advance.

I understand that the university will not reimburse me for cash advance fees unless pre-approved in writing by the UA MAU Travel Coordinator.

I will be responsible for making payments and any associated late fees, and verifying and reconciling all account activity. I will be reimbursed only for valid business expenses through the UA travel reimbursement process. Lunderstand that I must pay my account in full each month. I understand that there should be no unpaid balances carried over from month to month. An extended grace period can be authorized on a case by case basis by the University Travel Department with written business justification.

I authorize the University to withhold any amount of funds due me from UA, including salary or wages if I fail to settle my account I understand that the Office of Human Resources and the Travel Card Administrator have the right to establish the amount of deduction to reconcile past due accounts. I will maintain the UA Travel Card with the highest level of security. If the Card is lost or stolen, or if I suspect the Card or Account Number to have been compromised, I agree to immediately notify *JPMorganChase* at **1-800-316-6056** and the UA MAU Travel Coordinator.

I agree to return and cease use of travel card upon termination of employment whether for retirement, voluntary separation, resignation, or dismissal, or at any other time requested by UA. In addition, I must return and cease use of the Card in the event of transfer or relocation.

By signing below, I acknowledge that I have read and agree to the terms and conditions of this agreement. I certify that as a participating Cardholder of the UA Travel Card Program, I assume the responsibilities listed above.

Employee Signature	Date (MM/DD/YYYY)
Name (Print)	
MAU ProCard/Travel Program Administrator Signature	Date (MM/DD/YYYY
Name (Print)	