



Department of Administrative Services

US Bank Travel Card Agreement

Employee Name (print): _____

Agency Name: _____ Agy No: _____

A State employee seeking to obtain a State of Oregon US Bank Travel Card must sign this agreement and complete the Card Provider's application.

Employees must provide their Social Security number to the Card Provider for a personal credit check. The Card Provider uses the applicant's FICO score to establish credit risk without affecting the employee's personal information at the credit bureaus. The bank may adjust the employee's credit limit as a result of the review.

The US Bank Travel Card is authorized *only* for the cardholder's travel-related expenses incurred while on official State business. Any other use, including personal purchases, is strictly prohibited and considered abuse of the card.

The US Bank Travel Card is a **personal liability charge card**, obtained through the State's contract with the Card Provider. The US Bank Travel Card is not a credit card. The cardholder is personally responsible for all charges and fees and **agrees to pay the balance due in full every month**. The Card Provider's processing center must receive payment **on or before** the due date. Paying at a local branch does not guarantee the processing center will receive payment on time. Past due payments will affect your personal credit history.

The Card Provider cancels delinquent accounts 90 days past due. In addition, the Agency, DAS, and the Card Provider have the authority, and reserve the right, to revoke card privileges if a card is misused or abused. If a card is cancelled for any of these reasons, there is no reinstatement option. The only exception is if the delinquency was caused by Card Provider error (i.e., erroneous postings of charges or payments). The employee must still pay the account balance in full, surrender the cancelled card, becomes ineligible for future card privileges, and may be subject to disciplinary action, up to and including dismissal.

Upon termination, an employee must surrender the US Bank Travel Card to the supervising manager for cancellation. An employee who transfers to another agency may apply for a new account with approval from the new agency.

I agree to pay my US Bank Travel Card balance **in full** every month and allow sufficient time for the processing center to receive the payment on or before the due date. I understand that the account will be cancelled if the balance is 90 days past due with no provision for reinstatement, except as stated above.

I have read, understand, and agree to the provisions of this Agreement and the Oregon Accounting Manual Policy 40.20.10 – US Bank Travel Card.

Employee Signature: _____ Date: _____

Authorizing Manager Signature: _____ Date: _____

Date Card Issued _____

Date Card Cancelled _____