Commonwealth of Virginia Bank of America Purchasing Card Employee Agreement

I,(Enter empty Visa Purchasing CardAs a Cardholder, I agree to use of the Card	oloyee name her a)cknowledge receipt of comply with foe owing terms and cond	
I understand that I am being entrusted waithalua on behalf of my agency and will strive to obtain to SUHIHUUHG VXSSOLHUV DV	he best value for the agency by using	State contracts and other
I understand that my agency is liable to Bank of	of Americ ali cauthorized charges made	on the Card.
I agree to not share my Card or Card number I share my Card or Card number to anyone other disciplinary action as a result		
I agree to use this Card for approved purchase understand that my agency will review the use of action based on any discrepancies understand that deduction. , DXWKRUL]H 5DGIRUG	f this Card and the related manageme at any personal charges made on the S	nt reports and take appropriate ☑PLOesOlt in payroll
I will follow the established procedures for the my privileges or other disciplinary actions, up to		
I agree to return the Card immediately upon re	equest or upon termination of employm	nent (including retirement).
If the Card is lost or stolen, I agree to notify Baimmediately	ank of America and the Agency Progra	ım Administrator
I agree to successfully complete annual Cardh card renewal period.	older training as well aasnaagnemployee	e agreement at each
I agree not to use my card to pay for past due	invoices to circumvent Prompt Pay po	licies and procedures;
For Agencies utilizing eVA: I understand th eVA for those purchases that qualify and record		
I agree not to write down or share my Card Administrator or Bank of America.	¶s pin number with anyone, including	my Agency Program
I understand that Chip and PIN technology terminals.	is only utilizepoint of sale by vendors	who have chip enabled
I will not store my card number on amobile wallet service such as Apple Pay, Google Pay, S		nobile payment or digital
	В	
Employee¶ V Signature	Date	
Supervisor's Signater	Date	
ProgramAdministrator's Signature	Date	