



COPPIN STATE UNIVERSITY

Administration & Finance- Office of Procurement 2500 W. North Avenue Baltimore, MD 21216 410-951-3790

UNIVERSITY PROCUREMENT CARD RECEIPT ACKNOWLEDGMENT FORM

I have received my University Procurement Card, Account Number _____

I agree to:

- Submit a monthly report covering all charges to the card with accompanying receipts to the Accounts Payable Office.
- Use the card whenever possible, for University –related purchases of goods & services within the State of Maryland and CSU Procurement Card Policies & Procedures.
- Return the University Procurement Card to my immediate supervisor or approver when I terminate my employment with the University, or when I am specifically asked to do so.

I have read, understand and agree to the above-mentioned terms and to the Agreement governing the use of the University Procurement Card. In addition, I understand misuse or abuse of my card or willful violation of the terms of this agreement may result in a suspension or revoking use of the University Procurement Card.

First Time Receipt Acknowledgement _____

Renewal Receipt Acknowledgement _____

(Print Employee's Name)

(Employee's Name)

(Date)

Cc: Office of the Controller