



## Purchase Card Training Affidavit and User's Agreement

### Applicant Information

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Department Name: \_\_\_\_\_

Training Completion Date: \_\_\_\_\_

### Certification

I, \_\_\_\_\_, certify that I have completed training in the proper use of the University Purchase Card. I certify that I have read, understand, and agree to adhere to the requirements of the **University Purchase Card Program Policies and Procedures** that govern participation in the University of the District of Columbia Purchase Card Program.

I agree to adhere to the requirements of the **D.C. Code** as it pertains to purchase card usage, to include the mandatory SBE set-aside requirement for all purchases under the Program, and application of preference points / bid percentage reduction when comparing vendor quotations for the purpose of an award determination. I agree to support the University's 50% SBE Expenditure requirements under the D.C. Code.

I agree to maintain documentation demonstrating that the above SBE purchasing requirements were met for all applicable purchases for a period of three (3) years, and to make this documentation available to OCP within one (1) business day of it being requested. I understand that transactions will be audited for compliance with the above SBE purchasing requirements, and that failure to abide by these requirements may result in removal from the Purchase Card Program.

I understand that the University Purchase Card is the property of the University of the District of Columbia, and must be surrendered upon separation from University employment, or as deemed appropriate by the Chief Contracting Officer or other authorized designees.

**I understand that I can be held personally and financially responsible for any unauthorized purchases or use of the University Purchase Card, including permitting vendors to charge sales tax for card purchases.**

I understand that violations of any of the provisions of the above referenced directive may result in suspension and cancellation of my Purchase Card privileges or may be the basis for disciplinary action and criminal prosecution.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date