

Help sheet:
P-card Agreement & Application

1. The bookkeeper/secretary will fill in his or her name and email address in the fields below and click on the blue “Go to form” button.

Your full name / Su nombre completo

Your email / Su correo electrónico

Enter to receive confirmation of submission.

Go to form / Ir al formulario

Preview: P-Card Agreement & Application

**AURORA PUBLIC SCHOOLS DISTRICT
PURCHASING CARD APPLICATION**

I agree to the following regarding my use of the Aurora Public Schools District Purchasing Card:

1. I understand that under no circumstances will I use the Purchasing Card to make personal or nonwork-related purchases, either for myself or others.
2. I understand that I will not request or receive cash from suppliers as a result of exchanges or returns.
3. I understand that I am the only individual authorized to use the Purchasing Card assigned to me. It is not transferable to any other individual.
4. I understand that Aurora Public Schools District can terminate my right to use the Purchasing Card at any time for any reason. I agree to inform the card issuer's department administrator immediately upon the request of the Purchasing Department for reasons of employment.
5. I will follow the established procedure for using the Purchasing Card. Failure to do so may result in either revocation of my card privileges or other possible disciplinary actions, up to and including termination of employment.
6. I have reviewed the Purchasing Card application ([http://aps.k12.co.us/procurement/22-ages-card/22-ages-card/](#)) and understand the guidelines and requirements for using the Purchasing Card.
7. I agree that should I violate the terms of this Agreement and use the Purchasing Card for personal use or gain that I will reimburse Aurora Public Schools District for all incurred charges and any fees related to the collection of those charges. If the employee does not reimburse the district directly, a payroll deduction may occur.
8. I understand that I am required to provide itemized receipts for all purchases made on my P-card. I understand it is my responsibility to submit such the Aurora Public Schools District. I also understand that I must provide itemized receipts for transactions made on my P-card. If the employee does not submit such receipts directly to payroll deduction may occur.

<hr/> <p style="text-align: center;">Employee Name (Type or Print)</p>	<hr/> <p style="text-align: center;">Supervisor Name (Type or Print)</p>
<hr/> <p>Signature</p>	<hr/> <p>Signature</p>
<hr/> <p>Date</p>	<hr/> <p>Date</p>

2. **Scroll down** to the application, and fill in the yellow fields. Fields highlighted in red are required. The rest of the sections on the form will be available to be filled in later.



Aurora Public Schools P-Card Application

School/Department Select...

Please type or print clearly. Incomplete

- Select...
- APS Foundation
- APS Online
- Arkansas
- Aurora Central
- Aurora Frontier
- Aurora Hills
- Aurora Quest
- AWCPA
- Boston
- Centralized Admissions
- Century
- Chief Academic
- Chief Accountability and Research
- Chief Communication
- Chief Financial
- Chief Information
- Chief Operating
- Chief Personnel
- Clyde Miller

Cardholder Information													
Name (First, Middle Initial, Last)													
Last 4 digits of SSN (used to activate your card)													
Employee ID Badge Number													
Card Details													
BRO code with ChargeRx Budget code nickname	Exam												
Name of ChargeRx Card Manager													
ChargeRx Approver's name and title													
	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;"></th> <th style="width: 25%; text-align: center;">Default</th> <th style="width: 25%; text-align: center;">Requesting</th> </tr> </thead> <tbody> <tr> <td>Single transaction dollar limit:</td> <td style="text-align: center;">\$1,000</td> <td style="text-align: center;">\$ </td> </tr> <tr> <td>Monthly transaction dollar limit:</td> <td style="text-align: center;">\$5,000</td> <td style="text-align: center;">\$ </td> </tr> <tr> <td colspan="3">Will this cardholder need travel on their card? <input type="radio"/> Yes <input type="radio"/> No</td> </tr> </tbody> </table>		Default	Requesting	Single transaction dollar limit:	\$1,000	\$ 	Monthly transaction dollar limit:	\$5,000	\$ 	Will this cardholder need travel on their card? <input type="radio"/> Yes <input type="radio"/> No		
	Default	Requesting											
Single transaction dollar limit:	\$1,000	\$ 											
Monthly transaction dollar limit:	\$5,000	\$ 											
Will this cardholder need travel on their card? <input type="radio"/> Yes <input type="radio"/> No													
<div style="background-color: #c00000; color: white; padding: 10px; display: inline-block; border-radius: 5px;"> Submit form / Enviar formulario </div>													
Cardholder's Signature	Date												

- After the fields are completed, click on the red "Submit form" button at the bottom.



School/Department

Please type or print clearly. Incomplete applications cannot be processed

Cardholder Information													
Name (First, Middle Initial, Last)	Position												
Kimberly Herndon	Clerk												
Last 4 digits of SSN (used to activate your card)	Card Holder's E-Mail Address												
Employee ID Badge Number	Optional: Cell Phone # (used to alert you with potential fraud)												
Card Details													
BRO code with ChargeRx Budget code nickname <i>Example: (575) PPA.High Schools.Supplies</i>													
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Cardholder's Signature	Date												

Submit form / Enviar formulario

4. A new window will open. Enter the cardholder's name and email address in the designated fields and click the blue "Send to this recipient" button. The electronic form will be emailed to the cardholder to electronically sign and complete the rest of the fields. Note: the subject line and the message in the email are pre-filled with all the information the cardholder will need when they read their email.

✕

Please enter next recipient below. Send to this recipient

Cardholder	<input style="width: 90%;" type="text" value="Kimberly Herndon"/>
Email	<input style="width: 90%;" type="text" value="kmherndon@aps.k12.co.us"/>
Confirm Email	<input style="width: 90%;" type="text" value="kmherndon@aps.k12.co.us"/>

Subject

A document for {recipient} titled P-Card Agreement & Application is waiting

Message

You have received a document for {recipient} from Alyssa Loyd.
Please fill out your parts of the form and submit according to instructions on the online form and website.

Please be sure to click the large red 'Submit form' button at the bottom of the form once you have completed it

Allow replies to this email

5. The cardholder will receive an email with a link to complete the form electronically.

FORM WAITING

Hi Kimberly Herndon,

You have received a document for Alyssa Loyd - test - - APS Foundation from Alyssa Loyd.

Please fill out your parts of the form and submit according to instructions on the online form and website.

Please be sure to click the large red 'Submit form' button at the bottom of the form once you have completed it.

You can check the status of your form by clicking on the button or link below at any time:

[View Your Form](#)

Link to form: https://chalkschools.com/docs/99?form_request_id=536939&token=b3a3896c-f482-4070-9b7a-f77592167004

Note: This is your personal link to the form so only forward this email if you would like others to view your form.



Title

P-Card Agreement & Application

For

Alyssa Loyd - test - - APS Foundation

Sent

07/08/16 03:03:47 PM

This message was sent to you by the Chalk Document Service. If you need further information about the sender, contact Chalk at support@chalkschools.com.

You may be asked to electronically sign this document. To learn more about electronic signatures, [click here](#). If you do not wish to sign this form electronically, [click here](#).

6. When the cardholder clicks on the link, they can fill in the fields they are required to fill in. They first need to sign and date the Agreement. To sign the document, click on the “Click to sign here” button.

-
4. I understand that Aurora Public School District can terminate my right to use the Purchasing Card at any time for any reason. I agree to return the card to my department administrator immediately upon the request of the Purchasing Department or termination of employment.
 5. I will follow the established procedures for using the Purchasing Card. Failure to do so may result in either revocation of my user privileges or other possible disciplinary actions, up to and including termination of employment.
 6. I have reviewed the Purchasing Card regulations at <http://purchasing.aurorak12.org/p-cards/regulations/> and understand the procedures and requirements for using the Purchasing Card.
 7. I agree that should I violate the terms of this Agreement and use the Purchasing Card for personal use or gain that I will reimburse Aurora Public School District for all incurred charges and any fees related to the collection of those charges. If the employee does not reimburse the district directly, a payroll deduction may occur.
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<input type="text"/>	_____ Supervisor Name (Type or Print)
Employee Name (Type or Print)	
<input type="text" value="Click to sign here"/>	_____ Signature
Signature	
<input type="text" value="mm/dd/yyyy"/>	_____ Date
Date	

I have reviewed this form ▾

7. When clicking on the “Click to sign here” button, a new window opens to electronically sign the form. The cardholder needs to type in his/her name and click on the “Add signature” button.

Type your name

Kimberly Herndon

Review your signature

Use Typed Draw It

Kimberly Herndon

By clicking 'Add signature' you accept the terms of this document and agree to Chalk's [Terms of Use](#). If you do not wish to sign this form electronically, [click here](#).

[remove](#) **Add signature**

does not reimburse the district directly, a payroll deduc

8. This is what the electronic signature looks like after you click the “Add signature” button. After adding the date, **scroll down** to the application.

Purchasing Card at any time for any reason. I agree to return the card to my department administrator immediately upon the request of the Purchasing Department or termination of employment.

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Kimberly Herndon

Employee Name (Type or Print)

Supervisor Name (Type or Print)

Kimberly Herndon

Signature

Signature

07/08/2016

Date

Date

I have reviewed this form ▾

9. The cardholder will fill in the yellow fields. Fields highlighted in red are required fields.

Please type or print clearly. Incomplete applications cannot be processed

Cardholder Information													
Name (First, Middle Initial, Last)	Position												
Kimberly Herndon - TEST (Not Ordering Card)	Clerk												
Last 4 digits of SSN (used to activate your card)	Card Holder's E-Mail Address												
1234	kmherndon@aps.k12.co.us												
Employee ID Badge Number	Optional: Cell Phone # (used to alert you with potential fraud)												
1234	303-123-4567												
Card Details													
BRO code with ChargeRx Budget code nickname <i>Example: (575) PPA.High Schools.Supplies</i>													
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Name of ChargeRx Card Manager	ChargeRx Approver's name <u>and title</u>												
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Will this cardholder need travel on their card?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No											
<i>Kimberly Herndon</i>	07/08/2016												
Cardholder's Signature	Date												
	Approver's Signature												
	Date												

For Purchasing Use Only

Agent #: 2923 (Silver) I have reviewed this form ▾ 524PUR 524GHST
 Account # _____

10. After all the fields are completed, click on the "I have reviewed this form" button at the bottom. A drop down will show up. Click on "Send to next approver".

Cardholder Information													
Name (First, Middle Initial, Last)	Position												
Kimberly Herndon - TEST (Not Ordering Card)	Clerk												
Last 4 digits of SSN (used to activate your card)	Card Holder's E-Mail Address												
1234	kmherndon@aps.k12.co.us												
Employee ID Badge Number	Optional: Cell Phone # (used to alert you with potential fraud)												
1234	303-123-4567												
Card Details													
BRO code with ChargeRx Budget code <u>nickname</u> <i>Example: (575) PPA.High Schools.Supplies</i>													
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Will this cardholder need travel on their card?	_____ Yes <input checked="" type="checkbox"/> No												
<i>Kimberly Herndon</i>	<input type="text" value="07/08/2016"/>												
Cardholder's Signature	Date												
	Approver's Signature												
	Date												

*****For Purchasing Use Only*****

Agent #: 2923 (Silver)	I have reviewed this form ▾	524PUR	524GHST
Account # _____	Send to next approver		
Purchasing Card Adminis _____	Send back for corrections		
	Deny		Date _____

11. Choose your supervisor from the drop down menu and type in his/her email address. The subject and message fields are pre-filled with the information your supervisor will need when he/she opens the email. Click on "Send to the recipient". Your supervisor will receive an email to electronically sign the forms, and then they will electronically forward it to Purchasing. The initiator of the form (bookkeeper/secretary) will receive an email when the form is complete with all signatures. You will be provided with a link to download a PDF version of the forms for your records. Purchasing does not need a physical copy of the agreement/application since they received it electronically.

The screenshot shows a web-based form for composing an email. At the top right, there is a close button (X) and a link that says "Download PDF". Below this, the text "Already completed by:" is followed by a list containing "1. Alyssa Loyd <ajloyd@aps.k12.co.us>". A blue button labeled "Send to this recipient" is positioned to the right of the text "Please select next recipient below.". The form has two main sections: "Supervisor" and "Email". The "Supervisor" field is a dropdown menu currently showing "Materials Management Director". The "Email" field contains the address "cjhumphrey@aps.k12.co.us". Below these fields is a "Subject" field with the text "A document for Kimberly Herndon - TEST (Not Ordering Card) - - Print Services titled P-Card.". The "Message" field is a text area containing the following text: "You have received a document for Kimberly Herndon - TEST (Not Ordering Card) - - Print Services from Kimberly Herndon. Please fill out your parts of the form and submit according to instructions on the online form and website. Please be sure to click the large red 'Submit form' button at the bottom of the form once". At the bottom of the message field, there is a checkbox labeled "Allow replies to this email" which is currently unchecked. A dark blue footer bar at the bottom of the form contains the text "***For Purchasing Use Only***".