



## State Travel Cardholder Agreement – Individual Card (Joint/Several)

The Community College of Denver (CCD) is pleased to provide you with a State authorized Travel Card (the "Travel Card"). The Travel Card represents CCD's trust in you as a responsible employee and is issued to you by CCD in consideration for your agreement to safeguard State funds and to make travel-related decisions and arrangements consistent with all applicable rules and policies and as set forth herein. Applicable rules and policies include, without limitation, the following:

State Procurement Rules: <https://www.colorado.gov/dfp/spo>  
State Travel Fiscal Rules: <https://www.colorado.gov/osc/travel-fiscal-rule>

I, \_\_\_\_\_ agree that upon receipt of my Travel Card, I shall comply with the applicable rules and policies listed above, this Agreement, and any subsequent revisions to any of the foregoing. As the cardholder, I accept responsibility for the protection and proper use of my Travel Card as outlined in this Agreement and all applicable rules and policies. I further agree to:

- 1 Use my Travel Card **only** for the purpose of paying vendors for allowable purchases of goods and services for official state government travel;
- 2 Not use my Travel Card for personal purchases or personal travel;
- 3 Not allow others to use my Travel Card;
- 4 Not use my card to pay for other travelers' expenses;
- 5 Submit travel expense reports for reimbursement of travel charges within 30 days of the Travel return date;
- 6 Make payment to the issuing bank within the bank's prescribed timelines; and,
- 7 Notify the issuing bank within the bank's prescribed timelines on any disputed and/or fraudulent charges.

I acknowledge and agree that I shall be personally responsible for all charges made by me on my Travel Card, including any interest on such charges. I understand that one (1) percent interest per month will be charged on the entire unpaid balance if not paid within 59 days.

I acknowledge and agree that CCD has the right, to the extent permitted by law, to deduct amounts equal to the unpaid balance of my Travel Card from: (a) my next available pay, if the issuing bank does not receive payment in full within 90 days or; (b) my subsequent pay, if the deduction from my next pay is not sufficient; or (c) my final pay, upon termination of my employment with the State or transfer to another State agency; and to pay all unpaid amounts to the issuing bank until the unpaid balance of my Travel Card is paid in full.

I understand that in the event of the willful or negligent default of my obligations under this Agreement, CCD may take any action, in accordance with applicable State Personnel Board rules, System and Board policies, and other applicable law, for the recovery of unpaid amounts and/or the imposition of appropriate corrective or disciplinary action permitted under the State Personnel Board rules and other applicable law.

If my Travel Card is lost, stolen, or compromised in any manner, I shall immediately notify the CCD's travel compliance designee and the bank issuing the Travel Card. (The issuing bank's phone number and address can be found on the Travel Card and on the State Commercial Card Program website at <https://www.colorado.gov/pacific/sites/default/files/Citi%20Card%20Program%20Contacts%2012%2013.pdf>.)

Upon notification of my transfer from CCD, change in duties, termination of employment, suspension or cancellation of my Travel Card privileges, I agree to notify CCD's travel compliance designee and to promptly return the Travel Card to the Department.

**Cardholder:** \_\_\_\_\_  
S Number Phone Number

**Cardholder:** \_\_\_\_\_  
Print Name Signature Date

**Approving Authority/Supervisor:** \_\_\_\_\_  
Print Name Signature Date