II. POLICY STATEMENT:

Region 10 PIHP recognizes both the convenience and administrative cost savings offered by the use of business credit cards for certain purchases, and the need for purchase options other than traditional business checks in many circumstances; therefore it is the policy of Region 10 PIHP to provide for and allow the use of credit cards by its employees.

III. DEFINITIONS: N/A

IV. STANDARDS:

A. Credit cards may be issued to Board members and Region 10 PIHP employees demonstrating an ongoing and frequent business need to make authorized purchases.

B. All credit cards issued by Region 10 PIHP are considered property of Region 10, and not personal property of individuals assigned them. Individuals in possession of PIHP credit cards are responsible for taking adequate care for the safekeeping and protection of such PIHP property.

C. Purchases made with Region 10 credit cards are subject to the same requirements for review and approval as all other PIHP disbursements.

D. The use of Region 10 credit cards is strictly limited to approved PIHP business. Under no circumstances are PIHP credit cards to be used for personal use, even if such charges are later reimbursed to Region 10 PIHP. The use of a Region 10 credit card to purchase goods or services other than for official use of the PIHP is fraudulent use and is subject to disciplinary action and/or termination of employment as determined by the CEO. In addition the PIHP may take criminal and/or civil legal action to recover losses incurred by such use.

E. The Finance Department shall require the immediate return of the card in the event it is determined there has been misuse or abuse of privileges.
F. Credit limits shall be determined and modified by the CFO in coordination with the Department Head. The CFO may change the credit limit of any card without notice to an employee, if necessary for sound business management. Credit limits in excess of $20,000 shall require the approval of the Board Treasurer.

G. Cardholders shall retain all vendors’ receipts, records of telephone orders and/or copies of mail orders and file for future reconciliation of the credit card statement. Certain purchases (such as telephone orders) may not provide receipts. In that case, a Receipt Exception Form must be completed and approved by the employee’s supervisor, CFO or the CEO.

H. Cardholders are responsible for submitting all supporting documentation to the Finance Department within 15 days. Each purchase should have an appropriate budgetary account code assigned. Failure to comply with this policy may result in the discontinuation of credit card privileges.

I. In the event that sufficient support is not provided to the Finance Department within 90 days, any unsupported purchases will be presumed to be personal expenses, and the cardholder may be held responsible for reimbursing the PIHP.

J. PIHP credit cards will be issued to specific individuals and are nontransferable. No cardholder may permit another person to use his or her Region 10 credit card for any reason. Any purchases made with a cardholder’s card will be considered to have been made by the cardholder and will be his or her responsibility.

K. If a PIHP credit card is lost or stolen, the cardholder shall inform the CFO immediately.

L. The CFO reserves the right to randomly flag credit statements for the cardholder to justify charges.

M. All cardholders shall sign an agreement stating they will abide by the terms and conditions as set forth by this policy to be kept on file with the Finance Department.

V. **PROCEDURES:** N/A

VI. **EXHIBITS:**
   A. Receipt Exception Form
   B. Cardholder Agreement
Region 10 PIHP

Receipt Exception Form

It is Region 10 PIHP’s policy to require receipts for all purchases. However, there may occasionally be circumstances where a receipt is unavailable due to loss or the nature of the transaction. In those instances, this form should be completed by the employee making a purchase and approved by his or her supervisor.

Employee: ________________________________  Purchase Date: ____________

Vendor: ________________________________  Amount: ______________

Description: ________________________________________________

Method of payment:  [ ] Cash  [ ] Check  [ ] Credit Card

GL Code: ________________________________

Reason for no receipt:  [ ] Lost  [ ] None Given  [ ] Fraud

Dept. Head

Approval: ________________________________  Date: ________________________________
Region 10 PIHP

The use of PIHP credit cards is governed by Region 10’s official Credit Card Usage Policy (04-02-03). By signing the following agreement, the individual named below (the “Cardholder”) acknowledges that he or she has read and agrees to abide by that policy.

Assurances of the Cardholder

1. I understand that I will be expected to use the Region 10 PIHP credit card issued to me as directed by my supervisor under the provisions of Region 10’s official Credit Card Usage Policy.

2. I will not permit another person to use the PIHP credit card issued to me. Any and all purchases made with my card will be considered to have been made by me and will be my responsibility.

3. I will be responsible for the safekeeping of the PIHP credit card issued to me and, if lost, will report its loss immediately to my supervisor and the CFO.

4. I understand that my personal credit will not be affected by any use of a PIHP credit card.

5. I understand that in the event of termination of my employment with Region 10 PIHP, my final payroll check may be withheld pending the return of the PIHP credit card to my supervisor.

6. I understand that I am responsible to retain receipts for all purchases made with the Region 10 credit card issued to me, and that any missing receipts must be supported with a Receipt Exception Form, and approved by my supervisor.

7. I understand that the use of a PIHP credit card to purchase goods or services other than for official use of Region 10 is fraudulent use and is subject to disciplinary action and/or termination of employment as determined by the Chief Executive Officer. In addition, I understand that Region 10 may take criminal and/or civil legal action to recover losses incurred by such use.

I have read, understand, and agree to the conditions above:

Name of Cardholder (please print) ___________________________ Signature ___________________________

Region 10 credit card number ___________________________ Date issued to Cardholder ___________________________