GIFT CARD PURCHASE AGREEMENT

Upon purchasing a gift card, I agree to the following conditions:

1. I agree that the card will be issued ONLY to students of Roane State Community College for an officially authorized function of the College.
2. I agree to maintain documentation of the card number, card amount, recipient, date of purchase and date of distribution.
3. I agree to complete any and all reporting requirements promptly by the due dates requested.
4. I agree to keep the card in a secure, locked area until dispersed to a student.
5. I agree to follow the gift card and purchasing policies.
6. I agree to reimburse the College immediately for any purchase of a gift card in the event the expenditure is deemed inappropriate for purchase with College funds.
7. I authorize the College to deduct from my payroll check any disallowed charges which have not been resolved within thirty (30) days of receipt of notification of the questioned charges.

By signing below, I agree to the terms and conditions stated above. I understand the violation of any of the above terms and conditions may result in immediate cancellation of your right to purchase gift cards.

Employee Signature: _____ Date: _____

Director Signature: _____ Date: _____

Budget Manager: _____ Date: _____

Purchasing Agent: _____ Date: _____