

SUNY OLD WESTBURY
STUDENT GOVERNMENT ASSOCIATION DEBIT CARD AGREEMENT

You have been granted the privilege of having a PEX debit card. Your participation in the debit card program is a convenience that carries responsibilities along with it. Although this card is issued in the club name, it is SGA property and must be used with good judgment. **By signing this agreement, you acknowledge that you understand and will comply with all of the SGA guidelines, as listed below and included in the SGA SOP Bi-laws.**

I, as an authorized and approved cardholder have been trained and fully understand and agree to the following terms and conditions regarding the use and safekeeping of the debit card entrusted to me:

1. I accept full personal responsibility for the safekeeping of the debit card assigned to me, and that absolutely no one, other than me, is permitted to use the debit card assigned to me.
2. I will be making financial commitments on behalf of the SGA and will obtain fair and reasonable prices following SGA Policy.
3. I will upload my receipts to the PEX website within 12 hours after completion of a charge, showing a detailed receipt, entering proper notes into the PEX system associated with the transaction and applying the proper Quickbooks tag. "Budget Code Club Name Voucher #" i.e. "7000-030 Alianza Latina LN9-6D95".
4. When I use my debit card, I understand I am responsible for repayment of any of these charges deemed not allowable when reviewed by the SGA and fiscal agent. I further understand that any unallowable amount must be repaid to the SGA within 30 days after the debit charge.
5. I understand that failure to follow the provisions of the SGA more than once within any semester will result in suspension of the club's debit card.
6. I will not use the Debit card for non-SGA related expenses, unauthorized purchases, or for personal purchases.
7. I will immediately report the theft or loss of my debit card to PEX Customer Service at 1-866-685-0898 as well as inform the Business Manager at castonguaym@oldwestbury.edu.
8. I understand that I am personally responsible for obtaining ALL original detailed receipts (purchase and debit documents) and submitting them in accordance with PEX debit card procedures, for those purchases where a receipt is required.
9. I understand that any purchases made by me will be recorded and reviewed in management reports, to insure compliance with debit card guidelines.

10. I understand that failure to follow any of the above listed terms & conditions or if found to have misused the debit card in any manner may result in:

- o Revocation of the privilege to use the debit card
- o Disciplinary action
- o Termination from SGA, and/or criminal charges being filed with the appropriate authority.

I have read and understand the PEX Terms of Use, Privacy Policy, and cardholder agreement. (Pexcard.com).

I agree to surrender the debit card immediately for any reason and no later than the last day of classes of the current semester.

I, _____ hereby accept the above terms and conditions and acknowledge receipt of the Debit card.

Date SGA Signature

Print Name

Organization Name & Email

Student Email

Mobile number