



*BOSTON UNIVERSITY PURCHASING CARD*

**ACKNOWLEDGMENT—RELEASE OF CARD**

I acknowledge that a Boston University Purchasing Card is being released to me.

I have **completed** Cardholder Training and have read the Purchasing Card Program Manual in its entirety. Both of these are available on the Boston University Sourcing web site ([www.bu.edu/sourcing](http://www.bu.edu/sourcing)).

All purchases I make will be in compliance with the policies and procedures detailed in both the Purchasing Card Program Manual and the Cardholder Agreement.

\_\_\_\_\_  
Employee Name (Print)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**If the cardholder leaves the organization, the card must be returned to his/her immediate supervisor.**

Please mail or fax this form to the **PCard Administrator**:

PCard Administrator  
BU Sourcing  
985 Commonwealth Ave. Rm. 210  
Boston, MA 02215  
FAX: (617) 353-5384  
[pcard@bu.edu](mailto:pcard@bu.edu)