

**US BANK**  
Employee Purchase Card

**PURCHASING CARD APPLICATION**  
Submit to: **Department of Enterprise Services**  
**Finance Office, MS 41460**  
**DESGeneralledger@des.wa.gov**

**EMPLOYEE INFORMATION – Department of Enterprise Services Employees only**

First Name Middle Initial Last Name

Designated Approver - First Name Last Name

Division or Program

Work Physical Address City State Zip

Work Mailing (Billing) Address City State Zip

Statement Email Address Work Phone Cell Phone (optional)

Employee ID # Date of Birth (mm/dd/yy) Mother's Maiden Name

Monthly Credit Limit\* Single Purchase Limit\*  
*\*Standard default limit is \$1,500 – may be adjusted by US Bank card administrator*

**Additional Login purchasing profiles request:**

Office Depot

Amazon Business

**Required Training in LMS:**

- WA-State Small Purchases
- WA-State Purchasing and Procurement Ethics

*Cardholder Requirements, Expectations and approval signatures on the second page.*

## Cardholder Requirements and Expectations

- Purchasing Card is to be used for official state business only.
- Purchasing Card is an alternative method for **payment** of goods and services.
- Purchasing Rules and Regulations will be followed. Including but not limited to:
  - DES Policies: RCW 39.26
    - <http://www.des.wa.gov/about/pi/procurementreform/pages/policies.aspx>
    - [DES Use of Credit Cards to Make Purchases of Goods and Services Policy](#)
  - SAAM–State Administrative & Accounting Manual.
    - SAAM 85-32-30a At a minimum, payment processing documentation should include evidence of authorization for purchase, receipt of goods or services, and approval for payment.
- Transactions will be reviewed and coded online weekly.
- Proper documentation will be attached to monthly statement and submitted to Designated Approver/Supervisor by the last day of the month.
  - If product/services and backup documentation has not been received by month end, transaction will be reviewed and coded to verify posted transaction is valid and initiated by cardholder.
  - Statement transaction is to be marked to identify follow-up action is required to finalize. Follow-up will be a coordinated effort between cardholder and financial office.

### Designated Approver/Supervisor Requirements and Expectations

- Transactions will be approved and statements submitted to the financial office by the 5th day of each month.
- Ensure cardholders are appropriately trained.
- Ensure cardholders remain in compliance with requirements and expectations.

#### The card will not be used:

- for travel related expenses such as transportation, lodging and meals
- to obtain cash advances
- for payment to another State Agency

#### With proper program approval, the Card may be used for:

- Light Meals and Refreshments
- Capitalized Purchases (over \$5,000)

\* May need to contact US Bank Administrator to adjust restrictions to make these purchases (DES General Ledger team)

## EMPLOYEE/APPROVAL SIGNATURES:

By signing this document, I acknowledge that I agree to comply with the requirements as outlined.

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Signature of Applicant

Date (mm/dd/yy)

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Signature of Designated Approver/Supervisor

Date

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Signature of Assist. Director or Division Head

Date