



RF Travel Card Agreement for Employee

General Information:

Employee Name: _____ Email: _____

Department: _____ Work Phone: _____

Mailing Address for Monthly Statements:

Street: _____ City: _____ State: _____ Zip: _____

User Agreement (Please read and sign the bottom of this agreement):

Participation in the RF Bank of America Travel Card Program is a privilege that also carries cardholder responsibilities. As a recipient of a RF Travel Card I agree to comply with the following rules regarding usage of the card. By signing this agreement, you acknowledge that you understand and will comply with all of the RF Travel Card guidelines, as listed below.

- I accept full responsibility for the safekeeping of the RF Travel Card assigned to me, and that absolutely no one, other than myself is permitted to use the Travel Card assigned to me
- I understand that this card is intended for RF business travel expenses only and is not intended for personal use.
- I understand that all charges resulting from use of the card are my sole financial responsibility.
- I understand that payment for all charges on the card are due in full with each monthly billing. I further understand that I am responsible for the accrual of any late fees or interest charges which may result from untimely payment of the full balance each month.
- I agree to indemnify the RF for any loss resulting from misuse, unauthorized use, or my failure to pay balances when due. I understand that any unpaid balance that could result in a write off against the RF from Bank of America may be recovered by the RF through any means available to it under the law.
- I agree to return the card to the RF's Travel Card administrator upon request or upon termination of employment (including retirement). Alternatively, I may inform the administrator of my termination of employment to enable the administrator to process the card's cancellation. I agree not to use the card for after my termination of employment.
- I understand that termination of my card privileges by Bank of America or by the RF does not relieve me of my financial responsibility for payment of any charges to my card, including unpaid balances, late fees, or interest charges.
- I agree that if my employment terminates before the RF has reimbursed me in full for my authorized travel expenses, the RF may pay Bank of America directly the amount of my unreimbursed authorized travel expenses and seek reimbursement from me for any unauthorized travel expenses paid on my behalf.
- I understand that I am responsible for ensuring that the travel card and its card number are protected from theft or loss. In the event of loss, theft, or improper use of my card or card number, I agree to immediately notify Bank of America at (888) 449-2273 and the RF Travel Card Administrator at (518) 434-7136.
- I agree to comply with the RF Travel handbook and the requirements listed above for the RF Travel Card usage. Failure to comply with the travel policy and/or requirements for the RF Travel Card usage may result in termination of my card privileges by the RF or Bank of America.

Cardholder Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Please return this form to the ESF Travel Office 102 Bray Hall:

By Mail: 1 Forestry Drive, Syracuse, NY 13210

Or by Fax: (315) 470-4887

Or by Email: travel@esf.edu