



VISA Agreement Signature Sheet

The parties, by their signatures below, acknowledge having read this agreement and the EOU Procurement Card Policy and Procedures, understand them, and agree to be bound by their terms and conditions. Each has attended a training session provided by the Procurement Card Program Administrator. A copy of this agreement will be kept with the Procurement Card.

Name as Embossed on Card: _____

Primary Billing Index: _____

CUSTODIAN/ACCOUNT MANAGER

(Signature) (Printed Name) (Date)

DESIGNATED USERS

(Signature) (Printed Name) (Date)

APPROVALS

Budget Authority/
Cardholder: _____
(Signature) (Date)

Unit Administrator/
Business Manager: _____
(Signature) (Date)