



Purchasing/Warehouse Department
2326 Bisso Lane, Concord, CA 94520
(925) 825-7440, Ext. 3741

Cal Card Cardholder Summer Form For Summer 2012

Cardholder Name: _____

Cardholder Site: _____

Card Account Number: _____

I am a 12-month employee and will be present during the entire summer recess to receive and process my Cal Card Statement and receipts.

I understand that failure to submit my statement and receipts by the 10th of the following month to Accounts Payable may result in cancellation of my Cal Card.

Cardholder Signature: _____

The section below - to be completed by the "Approver" of the above-mentioned cardholder:

----- During the summer months, I will be absent, but I will take full responsibility for any purchases made by the cardholder listed above and I approve these purchases

----- I will be present during the entire summer months to approve cardholder purchases

----- I do not wish to take responsibility for the purchases made by the above-mentioned cardholder (please note that by checking this, the cardholders card will be de-activated during the summer months)

Signature: _____ Date: _____

Printed Name: _____ Ext/phone: _____
Approver Name

Please send this form in the pony to Laura Warner in the Purchasing Department. This form must be received by May 18, 2012. Form must have original signatures.

De-activation will be from May 21, 2012, to July 23, 2012.

If you have any questions, you may contact me via e-mail at: warnerl@mdusd.org or by phone at ext. 3741.

This form is necessary as the District "rides" on one account through U.S. Bank for the Cal Card. Late payments affect the District. U.S. Bank will suspend/cancel credit card privileges for the whole district if just one card holder fails to comply with our payment obligations.