

Complete Department Custodian Information (Please Print)

Card Custodian Name (as shown on file with HR)		Division / Department
EMPLID	Password	Building / Room/ Location Code or Mail Stop
Date of Birth	Custodian's Network ID	Custodian's Email address (first.last@case.edu)
Campus Telephone Number		Default Speedtype (Must be an OPR)

DCard Guidelines for Use and Compliance

The DCard may only be used for departmental event support planning. The "Departmental" Card (**DCard**) will be assigned to the appropriate person within the unit and will allow for food, retail and related purchases exclusively in support of department events. Travel related expenses are not be permitted on these cards. **DCards** will be subject to frequent audit as well as increased controls and reporting requirements.

The following are examples of actions that violate Dcard (and therefore DCard) policies and procedures and may result in disciplinary action:

- Purchase of items for personal use
- Purchase of items defined in restrictions and limitations for the DCard
- Purchase of restricted items or services from merchants excluded from valid DCard merchant categories
- Use of the DCard for purchases of more than the single transaction limit established for your card by splitting the purchase into more than one transaction
- Failure to return the DCard when reassigned, terminated or upon request
- Failure to obtain packing slips and receipts on every purchase and turning them in to your departmental administrator or their designee for the purpose of establishing and maintaining files for accountable reconciliation procures
- Using the DCard for travel and entertainment items or services (Determined by Division or School)

Your monthly dollar limit coincides with the billing cycle which begins on the 26th day of the month until the 25th day of the next month. Accounts must be edited on-line on a 24-hour/7-day time period during the current activity cycle period. Account edits must be made during current activity cycle no later than midnight (Eastern Time) of the 25th day of each month.

Note:

Complete the following information if the Department Administrator or the designee will be editing your account. All detailed original receipts must be reconciled with the statement information and retained in the department for audit purposes for seven (7) years). All receipts must be reconciled with the statement information and retained in the department for audit purposes.

Department Administrator Name (Print)	Department Administrator Name (Signature)
Telephone Number	Email Address
Department Administrator Name (Print)	Department Administrator Name (Signature)
Telephone Number	Email Address

