

Principal Investigator Agreement for Saint Louis University Grant Procurement Card

In addition to all other University purchasing guidelines I, _____, the Principal Investigator (PI) hereby agree to the following conditions for participation in the Saint Louis University Grant Procurement Card (GP-Card) Program:

1. I or my delegate will provide written or email approval for initiating GP-Card transactions.
2. I understand the GP-Card will be used to allocate costs to sponsored agreements; Saint Louis University adheres to the guidance provided by the sponsors of those agreements for allowable, allocable, reasonableness and consistent treatment. Use of the GP-Card will be guided and informed by the applicable Office of Management and Budget (OMB) Circulars (i.e., A-21, A-110 and A-133), specific agency guidelines and University policies and procedures.
3. I will authorize use of the GP-Card only for the actual and necessary program allowable expenses, in accordance with the University Purchasing Guidelines, GP-Card Policy & Procedure Guide, and Sponsored Programs' Cost Transfer Policy and ensure the appropriate grant fund is used.
4. Under no circumstances will I utilize or permit others to utilize the GP-Card to make personal purchases.
5. I will forward all original itemized merchant receipts and statements to the Departmental Reviewer for verification and reconciliation of monthly charges on the account in enough time for approvals and reallocation to be completed by deadline.
6. I understand the charges on the GP-Card will be billed to the department fund and account number if reconciliation and reallocation are not completed by the monthly deadline provided by the University's Procurement Card Administrator (PCA).
7. All GP-Card transactions will be subject to audits by Sponsored Programs, PCA, SLU internal audits, as well as, 3rd party auditors.
8. I understand that attempts to use the GP-Card that are not acceptable per OMB Circular A-21 for costs to be charged to a grant, detailed in Sponsored Programs' Cost Transfer Policy, will be reported to the PCA by Sponsored Programs.
9. I understand that unauthorized use of the GP-Card may result in revocation of the department's privileges or other disciplinary actions, up to and including termination.
10. In addition to any other legal recourse, which the University may have, I authorize the University to deduct from my salary any personal charges, which are prohibited.

Principle Investigator Name

Date

Principle Investigator Department

Principle Investigator Signature