

Check all that apply: Travel Card CTS Account

As an authorized and approved Arkansas Travel Card and/or Account Number holder, I fully understand and agree to the following terms and conditions regarding the use and safekeeping of the credit card(s) and/or account number(s) entrusted to me:

- I understand that failure to follow any of the above listed terms and conditions or if found to have misused the Travel Card and/or Account Number(s) in any manner may result in (a) revocations of the privilege to use the card/account, (b) disciplinary action, (c) termination of employment, and/or criminal charges being filed with the appropriate authority. I hereby accept the above terms and conditions.

Employee signature: _____ Date Signed: _____