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Policy Title USE OF LACOMBE COUNTY CREDIT CARDS		

Council Resolution No. C/244/04	Date: April 8, 2004	Cross Reference	Effective April 8, 2004
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Policy Statement:

Lacombe County recognizes the necessity of transacting certain purchases through credit cards issued in the name of Lacombe County. The acquisition and use of Lacombe County credit cards is hereby authorized in accordance with the following guidelines and procedures.

Guidelines/Procedures:

1. For the purpose of this policy the term "credit cards" also means fuel cards used at commercial card lock fuel facilities and at the Lacombe County Public Works shop tanks.
2. Credit cards are to be used only when other purchasing methods are impractical or not permitted by the supplier or vendor.
3. All credit card applications must be approved by the County Commissioner.
4. The issuance of credit cards to Lacombe County employees and departments, including fire departments, requires the authorization of the County Commissioner.
5. Employees that have been issued a credit card will be required to complete and sign a "Lacombe County Credit Card Use" form (see attached Schedule 1).
6. The Lacombe County department head and/or fire department Fire Chief will be required to complete and sign a "Lacombe County Credit Card Use" form (see attached Schedule 2) for credit cards issued for use by their respective County department or fire department.
7. Credit cards are to be used solely for the purchase of goods and services for Lacombe County.
8. Anyone using a Lacombe County credit card to make an unauthorized purchase will be subject to immediate dismissal.

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**LACOME COUNTY CREDIT CARD USE FORM
(INDIVIDUAL USERS)**

Credit Card Issuance:

I, _____, employee of Lacombe County, hereby confirm that I have been issued the following credit card:

Card Name: _____

Card Number: _____

I acknowledge that this credit card is to be used solely for the purchase of goods and services for Lacombe County, and understand that I will be subject to immediate dismissal should I use it for unauthorized purchases.

Date: _____

Employee Signature: _____

County Commissioner Signature: _____

Credit Card Return:

I, _____, employee of Lacombe County, hereby confirm that I have returned the above noted credit card:

Date: _____

Employee Signature: _____

County Commissioner Signature: _____

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**LACOME COUNTY CREDIT CARD USE FORM
(COUNTY DEPARTMENTS/FIRE DEPARTMENTS)**

Credit Card Issuance:

I, _____, department head/fire chief (circle one) of the _____ department/fire department (circle one) hereby confirm that I have received the following credit card(s) for my department/fire department (circle one).

Card Name: _____
Card Number: _____
Card Number: _____
Card Number: _____
Card Number: _____

I agree to advise all users of the above noted credit cards that 1) they are to be used solely for the purchase of goods and services for Lacombe County and 2) anyone using them to make an unauthorized purchase will be subject to immediate dismissal.

Date: _____
Department/Fire Department Chief Signature: _____
County Commissioner Signature: _____

Credit Card Return:

I, _____, hereby confirm that the below credit cards have been returned:

Card Name: _____
Card Number: _____
Card Number: _____
Card Number: _____
Card Number: _____

Date: _____
Department/Fire Department Chief Signature: _____
County Commissioner Signature: _____