## BATES COLLEGE EMPLOYEE CHARGE CARD Application and Agreement

	Middle Initial	Last Name	Last Name	
Home Address				
City	State	ZIP Code	E-mail	
		211 Couc	2 man	
Home Telephone	Work Telephone	Cell Phone (Optiona	Cell Phone (Optional)	
Employee Department	Employee Fund/Org (default)	Employee ID Number	er * Mother's Maiden Name/Password *	
* Information used for telephone assist	tance.			
Section B - Employee Ag	reement/Signature			
			.P. Morgan for all undisputed	
rection of the Travel and Exp employment, or as requested		y be cancelled in accorda r the card upon request b	nce with the "Non-Compliance" y the College, my termination of	
rection of the Travel and Exp employment, or as requested	pense Policy. I agree to surrende	y be cancelled in accorda r the card upon request b	nce with the "Non-Compliance" y the College, my termination of	
section of the Travel and Expending Employment, or as requested Employee Applicant Signature	pense Policy. I agree to surrende	y be cancelled in accorda or the card upon request b obligation to J.P. Morgan Date	nce with the "Non-Compliance" y the College, my termination of	
section of the Travel and Expending Employment, or as requested Employee Applicant Signature	oense Policy. I agree to surrende for failure to meet my financial o	y be cancelled in accorda or the card upon request b obligation to J.P. Morgan Date	nce with the "Non-Compliance" y the College, my termination of	
Employee Applicant Signature  Section C - Supervisor A	pense Policy. I agree to surrende for failure to meet my financial of uthorization / Monthly Char	y be cancelled in accorda or the card upon request by obligation to J.P. Morgan  Date  The card upon requested (continued to the card upon request by the card upon re	nce with the "Non-Compliance" y the College, my termination of	
Employee Applicant Signature  Section C - Supervisor A  \$2,000	pense Policy. I agree to surrende for failure to meet my financial of uthorization / Monthly Char \$3,000	y be cancelled in accorda or the card upon request by obligation to J.P. Morgan  Date  The card upon requested (capacity)  The card upon requested (capacity)  September 1997  September 2998	nce with the "Non-Compliance" y the College, my termination of	
Employee Applicant Signature  Section C - Supervisor A  \$2,000 \$5,000  Supervisor Signature	pense Policy. I agree to surrende for failure to meet my financial of uthorization / Monthly Char \$3,000 \$7,500	be cancelled in accordance the card upon request by obligation to J.P. Morgan  Date  Table  \$4,000  Other	nce with the "Non-Compliance" y the College, my termination of	
Employee Applicant Signature  Section C - Supervisor A  \$2,000 \$5,000  Supervisor Signature	uthorization / Monthly Chars, \$3,000 \$7,500  Date  Date	be cancelled in accordance the card upon request by obligation to J.P. Morgan  Date  Table  \$4,000  Other	nce with the "Non-Compliance" y the College, my termination of	

Date Card Received by Employee

Date Account Closed

Signature of Employee Receiving Card

Date Card Returned