**JMU International Cash Pay Out EMPLOYEE AGREEMENT**

I , agree to the following regarding my use of the International Cash Pay Out provided by JMU in relation to my approved university international travel.

1. I will not allow others access to these funds and will ensure the funds are kept secure at all times.
2. I agree that the funds may only be used for official business and travel expenses.
3. I am aware the Cash Pay Out is limited by the regulations set by the host countries. I understand the university does not have access to my transaction details or the capability to rescind the disbursement once instructions are confirmed.
4. I acknowledge the requirement to submit a completed JMU International Cash Pay Out Request Form in order to request funding. All international travel also requires a copy of a completed, approved Pre-Approval.
5. I understand all transactions require ID’s to match exactly to the recipient’s name as submitted in the transaction information and some countries require a test question***. I accept full responsibility for managing these details and acknowledge failure to do so puts university funds at risk.***

## I agree to submit a completed and approved Expense Report upon completion of each travel event and to include the amount funded through each Cash Pay Out Request I submit.

1. **I agree that if I violate the terms of this Agreement and use the Cash Pay Out Request inappropriately I will be required to reimburse James Madison University for all incurred charges and any fees related to the collection of those charges, including failure to submit timely and properly completed Expense Reports following each trip. I further understand these charges and/or fees may be withheld from my University pay as appropriate (according to University Policy 4502).**
2. I understand that failure to follow these procedures may result in the loss of the privilege for me to request any future International Cash Pay Outs.

# Employee Name (Print/Type) Department (Print/Type)

Street Address (Print/Type) City, State, Zip (Print/Type)

Date of Birth (DD/MM/YYYY) JMU Email

Employee ID# Phone Number Employee Signature & Date

Form Revised 9/02/2019