



SLCC PURCHASING CARD APPLICATION

- 1. Complete application
2. Sign and obtain authorization signature(s)
3. Read and sign 'Cardholder Agreement to Accept the SLCC Purchasing Card'
4. Send agreement and application via campus mail to Janice Lust - Mail Code PCH

P-Cardholder's Name exactly as it should appear on the credit card:

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Last Name \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Dept Name \_\_\_\_\_ Campus \_\_\_\_\_

Requested Monthly Limit \$ \_\_\_\_\_ Single Purchase Transaction Limit - \$1,000

Default Index \_\_\_\_\_ Default Current Expense Account - 70480

AUTHORIZATION SIGNATURES

P-Cardholder's Signature \_\_\_\_\_ Date \_\_\_\_\_

Full Time [ ] Part Time [ ] (VP Approval and Signature Required for Part Time)

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

VP Signature (for part time requests only) \_\_\_\_\_ Date \_\_\_\_\_

P-Card Administrator Signature \_\_\_\_\_ Date \_\_\_\_\_

P-Card Picked Up By \_\_\_\_\_ Date \_\_\_\_\_

FOR PURCHASING SERVICES USE ONLY

Division:

Department: