

PROCUREMENT CARD REQUEST/UPDATE FORM

Submit this form to procard@csus.edu

All Cardholders must be a current, non-temporary CSU SACRAMENTO employee

New Request - Requestor must complete the Procurement Card Training via CSU Learn Date: _____

Update to existing cardholder account - Please check all that apply

Name Change: Per Transaction Limit New Approving Official
Previous Name

Dept. Change Change 30-day Limit Chartstring Change Temporary Increase

****PLEASE PROVIDE JUSTIFICATION FOR NEW CARD REQUEST AND LIMIT INCREASE REQUEST****

The **Cardholder** is responsible for making direct contact with vendors to place orders using the Procurement Card and ensuring direct delivery to their office. The Cardholder will reconcile all ProCard purchases on-line, via CFS.

For further information, reference the Procurement Card Procedure Manual on our website at:
<http://www.csus.edu/aba/procurement/procurement-card.html>

The cardholder's name will appear on the credit card exactly the way that it reads on this form.

Card Holder Name:	Department Name:	
<input type="text"/>	<input type="text"/>	
Job Title:	Employee ID:	
<input type="text"/>	<input type="text"/>	
Bldg. Name & Rm#:	Campus Zip:	Phone:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email Address:	Cardholder Signature:	
<input type="text"/>	<input type="text"/>	

Per-Transaction Limit: \$ **30 Day Limit:** \$

Account:	Fund:	Department ID#:	Class Code:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

- | | |
|---|--|
| <input type="checkbox"/> Cardholder Training Complete | <input type="checkbox"/> Cardholder has CFS access |
| <input type="checkbox"/> A/O Training Complete | <input type="checkbox"/> A/O has CFS Delegation of Authority |

The Approving Official is responsible for reviewing and approving the monthly charges on-line, via CFS. By signing this this request form, the Approving Official certifies that they are authorized to approve charges for the account codes listed above and agrees to all terms and conditions set forth in the Procurement Card Program Manual.

Approving Official (Print)	Approving Official Signature:	Approving Official E-Mail:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Procurement Use Only:

Approved By: _____ **Date:** _____