

PROCUREMENT CARD

Cardholder Account Form

| NEW | CHANGE | DELETE | | Cardholder Account# | (Last six Digits Only) | | | | |
|---|------------------------------------|--------------------------|--------|------------------------------|---------------------------|--|--|--|--|
| | | CARDHOLDER INFO | RMATIC | ON (ALL FIELDS REQUIRED) | | | | | |
| O - malla - Lal - m N - m | | Department Name: | | | | | | | |
| Cardholder Name: CSU Employee ID | | Department # | | | | | | | |
| Number: Date of B | irth· | Department Address: | | | | | | | |
| EID Login: | | | oup: | | | | | | |
| Cell Phone: | | | | (if known) Cardholder CSI | I Email | | | | |
| Password (numbers & letters only) | | | | our unional reservation | | | | | |
| APPROVING OFFICIAL SECTION (ALL FIELDS REQUIRED) Default Account # Reallocator Name: | | | | | | | | | |
| Object Code | | | | Reallocator Em | nail: | | | | |
| Cycle Spending Lir (\$25,000.00 Max/N | | Approving Official Name: | | | | | | | |
| Single Purchase Limit (\$3,000.00 Maximum) | | | | Approving Offic | Approving Official Email: | | | | |
| #Transactions per c | cycle | | | | | | | | |
| #Transactions per o | day | | | | | | | | |
| Does Approving Of | fficial report to this cardholder? | Yes | No | | | | | | |
| Approving Official Signature | | | | Date: | | | | | |

BUSINESS NEED JUSTIFICATION

University Fiscal Rules require that all expenditures by university departments and their employees are for official University purposes only and are reasonable and necessary under the circumstances. PCARDS are for conducting official University business only. Before receiving a university-issued PCARD, it must be established that the employee has a business need for the card.

Employee's duties include regularly buying goods and services for CSU that cannot be done entirely through either Shop Catalogs or APO/DV in KFS

Employee is responsible for critical operations and needs a PCARD for occasional, but urgent, purchases that cannot be done through Shop Catalogs or APO/DV in KFS

Employee is a Business Officer or Supervisor and requires the ability to make purchases on behalf of the dept. or unit that meet all applicable requirements of CSU Financial Policies.

As the Department Head or Director*, I accept the risk to the department's account for all charges made on the employee's PCARD, including, but not limited to, charges that are unauthorized, violate PCARD rules, or otherwise cannot be approved.

Department Head or Director Signature



OFFICIAL FUNCTION STATUS (Complete this section ONLY if official function status is requested)

By Completing this section of the form, the undersigned acknowledges that he/she understands and will comply with all applicable University Policies and Procedures related to official function expenditures. Any/all transactions made in connection with an official function event must have the approval of an authorized official function representative who is properly delegated that authority, and that approval will be documented and filed with the transaction record. In any event, the authority for approving the official function transaction and responsibility for documenting the expenditure rests with the delegated official function approver.

| | Limited Cardholder Access (small purchases at grocery stores, department stores, etc.) Employees' duties include buying go supplies for official function events. This limited approval is made to allow the employee to make these purchases under the edirection of the authorized official function delegate. | | | | | | | | | | | |
|---------------------|---|---|---------------------|-------|---------|----------|--|--|--|--|--|--|
| | Cardholde | r Signature | | Date | | | | | | | | |
| | Delegated (| Official function Approver | Signature | Date | | | | | | | | |
| | planning ar | Cardholder Access to Hospitality Merchants (Restaurants, catering, hotel conference room charges). Employees' duties include planning and scheduling official function events. This approval is made to allow the employee to make these purchases under the express direction of the authorized official function delegate for specific documented official function activities. | | | | | | | | | | |
| | Cardholde | r Signature | | | Date | | | | | | | |
| | Delegated | Official Function Approver | Signature | Date | | | | | | | | |
| | Dean or VP | Signature | | | Date | | | | | | | |
| PURCHASING USE ONLY | | | | | | | | | | | | |
| Mccg: | | HIER | ARCHY LEVEL L6 NAME | | L6# | | | | | | | |
| | | | | DATE: | | | | | | | | |
| DATA ENT | CARD ORD | E-FILE RECV'D | DATA BASE | KFS | BANK CK | CH EMAIL | | | | | | |