

Purchasing Card Request Form

Section 1: Requestor Information. To be completed by the requestor.

Date of Request:	
Requestor's Name:	
Requestor's Title:	
Requestor's Department:	
Employee Status:	
Do you have a MyApps Account?	
Who will update the P-Card transaction in Oasis?	
Name of Group Coordinator if applicable	

Section 2: Card Limit. To be determined by the Department Head/ Area VP & P-Card Coordinator

Card Limits	To be completed by the Department Head/ Area VP	To be completed by the P-Card Coordinator
	Amount Requested	Amount Approved
Single Transaction Limit:		
Monthly Credit Limit:		

Section 3: Authorized Funds/Sub Funds & Units: To be completed by the Department Head/ Area VP

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Section 4: Required Approval Signatures: This form can be submitted to the P-Card Coordinator without signatures and entered into SignNow for all required signatures. All Signatures are required before P-Card training is setup.

Title	Signature	Date
Department Head		
Area VP		
P-Card Coordinator		
Chief Financial Officer		

Section 5: FOR BUSINESS & FINANCE OFFICE USE ONLY

Employee HR # :	
Training Setup Date:	
Date Cardholder Training Quiz Passed:	
Date Ethics Training Quiz Passed:	
Date Cardholder Agreement Signed:	
PCC Document #	
Date PCC Submitted to WWSAO	