



Purchasing Card Application
New Account Information Record

Accounts Payable Office

Send form directly to the Accounts Payable Office

To Add a New Account:

- 1. Indicate "New Account" under Type of Request.
2. Complete all fields on the form.

To Change Information on an Existing Account:

- 1. Indicate type of change under Type of Request.
2. Fill in card account number.
3. Fill in current name on card.

Type of Request

Check Appropriate Box:

- A. New Account (Plastic/No Plastic)
B. Address Change
C. Dept./Div./Acct. Code Change
D. Account Closure
E. Name Change
F. Credit Line Adjustment
G. Single Transaction \$ Limit
H. Other

Table with 3 columns: First Name, Middle Initial, Last Name

Complete only the fields to be changed in the following sections.

Cardholder Information:

First Name -10 characters (Embossed on card)
Middle Initial - 1 character (Embossed on card)
Last Name - 12 characters (Embossed on card)

Tax Identification Number: 936001786

Organization name - 19 characters
(User definable - Embossed below cardholder name on plastic)

Address - 36 characters
City - 25 characters
State - Abbrev.. 2 characters
Zip Code

Account Code Alpha Numeric -35 characters. Optional: Appears in Statement Billing File
Home Phone - 10 characters
Business Phone - 10 characters

Monthly Credit Limit..... 005000

Authorization: Single Transaction \$ limit..... 002500

Employee signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approving manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Plan Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_