

Purchasing Card Maintenance Form

Cardholder Information

Cardholder Name: Banner ID: Last 4 Digits:

Changes to Existing Account Information (complete only the section(s) for which a change is necessary)

Embossed Name

First Name: Last Name:

Statement Mailing Address

Department Name:

Room/Building Address:

City: State: Zip:

Telephone Number

Phone Number:

Email Address

Email Address:

Merchant Category Code Profile

Description of Change In Business Purpose

Credit Limits (Written justification must be attached to this form if the requested limit is greater than the standard threshold.)

Monthly Limit Single Transaction Limit # Daily Transactions

Limit Is Limit Is Limit Is

Temporary Dates To Temporary Dates To Temporary Dates To

Replace Reconciler

First Name: Last Name:

Banner ID: Email Address:

I hereby certify that I will reconcile the purchasing card transactions of the above listed cardholder.

Reconciler Signature: Date:

Purchasing Card Maintenance Form

Replace Approver

Primary Approver

First Name:

Last Name:

Banner ID:

Email Address:

I hereby certify that I will approve the purchasing card transactions of the above listed cardholder.

Approver Signature:

Date:

Backup Approver

First Name:

Last Name:

Banner ID:

Email Address:

I hereby certify that I will approve the purchasing card transactions of the above listed cardholder.

Approver Signature:

Date:

P-Card Cancellation

Reason for Cancellation

Form Approval

I hereby certify that the above listed cardholder has a valid business purpose to be issued a purchasing card for the limits requested.

Department Head/Approving Authority

Signature:

Date:

Printed Name:

Dean/Chair (if applicable)

Signature:

Date:

Printed Name:

Vice President/Provost (Only MCC Profile and Credit Limit Revisions Require VP Approval)

Signature:

Date:

Printed Name:

System Administrator

Signature:

Date:

Printed Name:

Purchasing Card Maintenance Form

Form Instructions

Field Name	Field Description
Cardholder Name	Embossed name on the p-card in which revisions are being requested.
Banner ID	Cardholder's KSU 9-digit employee number.
Last 4 Digits	The last 4 digits of the p-card's account number in which revisions are being requested.
Embossed Name - First and Last Name	First and last name that should be embossed on the p-card due to a legal name change of the existing cardholder. The combined First Name and Last Name fields can not exceed 21 characters.
Department Name	Department name in which the cardholder is physically located. If the cardholder transfers positions to a different department, the existing p-card must be cancelled and a new Purchasing Card Cardholder Application must be completed and approved. Department Name maximum field length is 25 characters. Example: Accounts Payable.
Room/Building Address	Room number and building name or building address in which the cardholder is physically located. Do not use PO Box 5190. Room/Building Address maximum field length is 25 characters. Example: 237 Schwartz Center or 800 E Summit St
City, State, and Zip	City maximum field length is 25 characters. State abbreviation maximum field length is 2 characters. Zip maximum field length is 10 characters. Example: Kent, OH 44242-0001
Phone Number	Cardholder's business phone number, including area code. Phone Number maximum field length is 12 characters. Example: 330-672-2607.
Email Address	Cardholder's email address. Email Address maximum field length is 50 characters. Example: kcarl@kent.edu.
Description	Revised business purpose for p-card usage. A description of the types of transactions that will be placed on the p-card. VP approval is required.
Monthly Limit	Maximum dollar amount of posted and authorized transactions allowable during a billing cycle. Cardholder's estimated spend during a one month period. Standard Monthly Limit is \$5,000. Written justification must be attached to this form if the requested limit is greater than the above standard. VP approval is required.
Single Transaction Limit	Maximum dollar amount that can be charged per transaction. KSU's purchase order threshold dictates this limit. Standard Single Transaction Limit is \$2,500. Written justification must be attached to this form if the requested limit is greater than the above standard. VP approval is required.
# Daily Transactions	Maximum number of transactions that can post to the p-card during a given day. Standard # Daily Transactions is 12. Written justification must be attached to this form if the requested limit is greater than the above standard. VP approval is required.
Limit Is	Indication if the credit limit revision will be temporary or permanent.
Temporary Dates	Time period in which the temporary credit limit revision is necessary.
Reconciler Information	
First Name and Last Name	An employee responsible for monthly reconciliation of transactions on the cardholder's p-card. The reconciler must be a KSU employee who is in a continuing assignment. Student employees, independent contractors, temporary or term employees, etc. are not permitted to reconcile a p-card. The combined First Name and Last Name fields can not exceed 21 characters.
Banner ID	Reconciler's KSU 9-digit employee number. Banner ID maximum field length is 9 characters.
Email Address	Reconciler's email address. Email Address maximum field length is 50 characters. Example: kcarl@kent.edu.
Approver Information (Primary Approver and Backup Approver)	
First Name and Last Name	An authorized employee responsible for approval of the cardholder's p-card transactions in accordance with normal departmental approval hierarchy as per policy 7-02.10. The approver must be a KSU employee who is in a continuing assignment. Student employees, independent contractors, temporary or term employees, etc. are not permitted to approve p-card transactions. The combined First Name and Last Name fields can not exceed 21 characters.
Banner ID	Approver's KSU 9-digit employee number. Banner ID maximum field length is 9 characters.
Email Address	Approver's email address. Email Address maximum field length is 50 characters. Example: kcarl@kent.edu.
Reason for Cancellation	Explanation for cancelling the p-card.