

Auburn University

Purchasing Card Application

Cardholder Information – (To be completed by Applicant)

| | | |
|------------|----------------|--------------------------------------|
| First Name | Middle Initial | Last Name (Maximum of 24 Characters) |
|------------|----------------|--------------------------------------|

| | | |
|------------------|-------------------|-------|
| Banner ID Number | Last 4 Digits SSN | Title |
|------------------|-------------------|-------|

| | |
|-----------------|-----------------------|
| Department Name | Business Phone Number |
|-----------------|-----------------------|

| | |
|-------------------------|---------------------------------|
| Department Abbreviation | Group Reconciler/Administrator* |
|-------------------------|---------------------------------|

Campus Address

| | | |
|------|-------|-----|
| City | State | Zip |
|------|-------|-----|

Employee Email Address

Employee Signature

\$5,000 Fuel Only (\$250)

Single Transaction Limit

\$5,000 \$10,000 Fuel Only (\$1,000)

Suggested Monthly Credit Limit

Dean/Director/Department Head Printed Name

| | |
|---|------|
| Dean/Director/Department Head Signature | Date |
|---|------|

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(To be completed by Procurement and Business Services)

| | |
|---------------------------------------|------|
| PBS Program Administrator's Signature | Date |
|---------------------------------------|------|

Applicant Hire Date \ DOB

*The "Group Reconciler/Administrator " is defined as the employee who prepares the Monthly Purchasing Card Reconciliation for that area.

After completion and approval, upload completed form in Banner Self-Service on the Request PCard Tab.