

University of South Carolina

Purchasing Cardholder Request Form

Eligibility Requirements:

- Applicant must be a USC Employee.
- The Approval of Department Head.
- Training Session Attendance.
- Signature on Cardholder Agreement (upon issuance of card).

In order to process your application, you must complete the entire form. We cannot process your form unless ALL information has been filled out. Fill in all the appropriate blanks while on the screen, except for the signature block. Then print out this form, have it signed by the department head, either fax this form to (803)777-2032 or mail to:

Purchasing Department
1600 Hampton Street
Columbia, SC 29208

SECTION I. CARDHOLDER INFORMATION

- LAST NAME**
- FIRST NAME**
- USC ID**
- PHONE**
- FAX**
- E-MAIL**
- DEPT. NAME**
- DEPT. ADDRESS**

As cardholder I will always treat the University of South Carolina Purchasing Card with at least the same level of care as personal credit cards. The card will be maintained in a secure location and the card account number will be carefully guarded. I will be the only person entitled to use the card.

I fully understand the intent of this program and will comply with all guidelines on the Purchasing Card Program as well as University of South Carolina policies and procedures relating to the expenditure of University funds.

CARDHOLDER SIGNATURE _____

DATE _____

SECTION II. DEPARTMENT HEAD APPROVAL

- DEFAULT ACCOUNT CODE**
- DEFAULT OBJECT CODE**
- DEFAULT COST SHARE (OPTIONAL)**

I hereby delegate transaction authority to the above cardholder and agree that the department liaison responsible for the associated department container will be responsible for reviewing transactions of the cardholder, to ensure the appropriate use and classification for a University expenditure.

DEPARTMENT HEAD SIGNATURE _____

DATE _____