REQUEST FOR PURCHASING CARD

Office of Business Services
Procurement Services
Lee Faris-Card Administrator
wfaris@rhmail.org

THIS FORM SHOULD BE SENT TO BUSINESS SERVICES WHEN COMPLETED

Date: _____

School or Department: _____

Cardholder/Position: _____

Reconciler/Liaison: _____

Training Required (Mandatory for new Cardholders/Liaisons):___Yes ___No

Requested Credit Limit: $_____

Intended Use:

_____

_____

_____

_____

Principal/Department Head Approval: _____

****************************COMPLETED BY BUSINESS SERVICES***********************

_____ _____
Robert Barnes Date
Executive Director of Finance

Approved ___Y ___N Approved Credit Limit: $_____

Date Processed: _____

_____ _____
Lee Faris, Procurement Manager Date