



Purchasing Card (P-Card) Request and Maintenance Form

Today's Date: _____

Request Type: ☐ New Card Request ☐ Maintenance Request ☐ Suspend, Deactivate, or Reactive Account

Purchasing Card (P-Card) Request

Requester Name:	Proposed Liaison Name:	Proposed Approver Name:
School/Department:		
District Position/Title:		
Why is a P-Card needed for your position?		
What types of purchases would you need to make?		
How often do you anticipate needing to use the P-Card?		

Requested Card Limit: _____

Approved Card \$ Limit by CFO: _____

Requestor Signature: _____

Date: _____

Supervisor Approval: _____

Date: _____

Procurement Director Approval: _____

Date: _____

CFO Approval: _____

Date: _____

Purchasing Card Maintenance Actions

Cardholder Name: _____		
☐ Name Change		
Current Name on P-Card: _____	Request Name Change to: _____	
☐ Location Change		
Current Location: _____	New Location: _____	
☐ Credit Limit Change (Requires CFO Approval)		
Explanation for Credit Limit Increase: _____		
Current Limit Amount: _____	Permanent Increase: Yes _____ No _____	CFO Approval: _____
New Requested Amount: _____	If no- Return Date: _____	

Suspend, Deactivate, or Reactive Account

Cardholder Name: _____	
☐ Card Lost or Stolen Report Lost/Stolen Card and/or Fraud to Bank of America Immediately	
Date Lost/Stolen: _____	Explanation: _____
☐ Request to Suspend P-Card	
Suspension Date Requested: _____	Explanation: _____
☐ Request to Cancel P-Card Return Card to Procurement Immediately	
Cancellation Date Requested: _____	Explanation: _____
☐ Request to Reactivate P-Card	
Reactivation Date Requested: _____	Explanation: _____

Card Returned to Procurement? ☐ Yes ☐ No

If Yes- Return Date: _____

Cardholder Signature: _____

Date: _____

Next-Level Supervisor: _____

Date: _____

TO BE COMPLETED BY P-CARD ADMINISTRATOR

☐ New Card

Training Date: _____

☐ Card/Account Action Request

Date Maintenance Performed: _____

P-Card Administrator Signature: _____

Director Verification: _____