



**Pacific Lutheran University**  
**Purchase Card Application**

*For Office Use Only*

Order Date:	Group:
Card #:	User ID:
Dist. Date:	Close Date:

**EMPLOYEE & COMPANY INFORMATION:**

\_\_\_\_\_ Cardholder First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Cardholder Last Name \_\_\_\_\_

\_\_\_\_\_ Position \_\_\_\_\_ Department \_\_\_\_\_ PLU ID \_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_ Business Phone \_\_\_\_\_ Email Address \_\_\_\_\_

**SPEND PROFILES: All university P-cards will be set at a standard \$5,000 Monthly Credit Limit and \$2,500 Single Transaction Limit. If you need a different spend profile, please check the box at the left and fill out page two of this application. If the standard is acceptable, skip page two.**

**FINANCE CODE Default FOAP (xxxxxx-xxxx-xxxx):** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Reviewer/Proxy Name (print):** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Approver Name (print):** \_\_\_\_\_ **Email:** \_\_\_\_\_

**EMPLOYEE SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Personal information is used for security reasons ONLY and will not affect your personal credit.*

**DEPARTMENT SUPERVISOR/APPROVER:**

By submitting this Application to the Bank for the applicant(s) named herein, the undersigned, a duly authorized representative of PLU, does hereby:

- (1) certify that, to the best of Client's knowledge, information and belief, the information provided by PLU in this Application and in any supporting documentation is accurate,
- (2) certify that the true identity(ies) of the person(s) named in this Application has/have been verified and that this/these person(s) is/are employee(s) or agent(s) of PLU and has/have been duly authorized to use the Card(s) to incur expenses on behalf of PLU,
- (3) in relation to an application for a Card under a US program, certify that the applicant(s) named herein have consented to the provision of their information in this Application,
- (4) where this Application is being submitted to request the issuance of a Card, confirm that the applicant(s) named in this Application has/have consented to the issuance of a Card(s) in their name(s). PLU shall maintain evidence of the applicant's consent to the provision of their information in this Application and the applicant's consent to Card issuance and shall furnish such evidence to the Bank upon request. In this Application, the term "Bank" refers to Bank of America and their affiliates.

By signing below, you are acknowledging that you have read and accept the above:

**Supervisor/Approver :**

\_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Print Name \_\_\_\_\_

# Spend Profiles

Pacific Lutheran University

All PLU university P-cards will be set at a standard credit line of \$5,000/month \$2,500 single transaction. If you require a different profile, please check the profile below and briefly explain below the reason for the increase.

CL-1,000 SL-500  
CL-3,000 SL-1,000  
(standard 5,000/2,500)  
CL-7,500 SL-5,000  
CL-10,000 SL-5,000  
CL-15,000 SL-7,500  
CL-25,000 SL-15,000

CL-40,000 SL-20,000  
CL-50,000 SL-20,000

WANG Center Use Only: Monthly/\$7,500-Single/\$5,000

CL-Wang Center Programs 34%  
CL-Wang Center Programs (high cash) 75%  
CL-Wang Center Domestic (NO cash)

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# Pacific Lutheran University Purchasing Card Program

## Cardholder User Agreement

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The PLU Purchasing Card through Dcpn'qh'Co gtléc is a convenience that carries cardholder responsibilities. The card is issued in your name, via authorization of your Financial Manager, however it is University property and is for only university business. The card is not an entitlement, nor is it reflective of title or position within the University. **As a recipient of a Pacific Lutheran University Purchasing Card (P-Card), I agree to the following (initial each item):**

\_\_\_\_\_ 1. I understand that my P-Card may be revoked at any time based on a change of assignment, transfer of position, or termination of employment.

\_\_\_\_\_ 2. The P-Card is to be used for business-related purposes only. **No Personal charges under any circumstances.**

\_\_\_\_\_ 3. I am responsible for all charges that I put on the card. I understand that I am the only person entitled to use the P-Card issued in my name.

\_\_\_\_\_ 4. I understand that improper use of the card can be considered a misappropriation of University funds, which may result in disciplinary action, up to and including termination.

\_\_\_\_\_ 5. I understand that I am responsible for complying with the PLU Purchasing Card and Business Expense Policies. **Including maintaining proper itemized receipts, supporting documentation, and reconciling the monthly statements. Documentation will be readily available for audit purposes.**

\_\_\_\_\_ 6. I understand on campus charges are not allowed on the p-card and local meals must have a bona fide business purpose with documentation that includes list of attendees and the business purpose.

\_\_\_\_\_ 7. I agree to review my P-Card transactions in *Works* and confirm that the charges post to the correct fund, organization and account codes prior to the monthly review cutoff date.

\_\_\_\_\_ 8. I am responsible for resolving any discrepancies found during the reconciliation process by first contacting the vendor/supplier, second with Bank of America, then the Purchasing Card Administrator.

\_\_\_\_\_ 9. I am responsible for following proper credit card security measures to ensure that my card and account number are protected from theft or loss. I will immediately notify Bank of America and then the university Purchasing Card Administrator of any loss or improper use of my P-card.

\_\_\_\_\_ 10. I will surrender the Purchasing Card to the PLU Purchasing Card Administrator, departmental proxy or department head/financial manager upon demand, or termination of employment.

\_\_\_\_\_  
**Cardholder Signature**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Date**

*I certify that I will monitor and review the purchases made by this cardholder in accordance with the Purchase Card and PLU Travel and Business Expense policies. I understand it is my responsibility to revoke the cardholder's use of the card if circumstances warrant.*

\_\_\_\_\_  
**Financial Manager/Approver Signature**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Date**