

EMPLOYEE & COMPANY INFORMATION:

For Office Use Only		
Order Date:	Group:	
Card #:	User ID:	
Dist. Date:	Close Date:	

Cardholder First Name	Middle Initial	Cardholder Last Name
Position	Department	PLU ID
()	_	
Business Phone	Email Address	
		a standard \$5,000 Monthly Credit Limit
		ent spend profile, please check the box at
		ney will be added to the Amazon system.)
Check here if this person will be	e ordering from Amazon. (m	iey win be added to the Amazon system.)
FINANCE CODE Default FOAP (xxx	xxx-xxxx-xxxx):	
Reviewer/Proxy Name (print):		Email:
Approver Name (print):		Email:
EMPLOYEE SIGNATURE:		Date:
Personal information is used for sect	urity reasons ONLY and will	
DEPARTMENT SUPERVISOR	/APPROVER:	
By submitting this Application to the Ba authorized representative of PLU, does		d herein, the undersigned, a duly
(1) certify that, to the best of Client's k this Application and in any supporting	_	elief, the information provided by PLU in
	yee(s) or agent(s) of PLU and	is Application has/have been verified and has/have been duly authorized to use the
(3) in relation to an application for a Ca consented to the provision of their info		fy that the applicant(s) named herein have
named in this Application has/have co evidence of the applicant's consent to	nsented to the issuance of a C the provision of their informa nish such evidence to the Bank	e of a Card, confirm that the applicant(s) Card(s) in their name(s). PLU shall maintain Ition in this Application and the applicant's k upon request. In this Application, the term
By signing below, you are acknowledge	ing that you have read and acc	cept the above:
Supervisor/Approver:		
Signatu	ıre	Date
Print N	ame	

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-40,000 SL-20,000
CL-3,000 SL-1,000	CL-50,000 SL-20,000
(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	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)



Pacific Lutheran University Purchasing Card Program Cardholder User Agreement

The PLU Purchasing Card through Dcpm'qh'Co gtlec 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):

Purchasing Card (P-Card), I agree to th	e following (initial each ite	em):
1. I understand that my P-Card ma transfer of position, or termination of emp	•	sed on a change of assignment,
2. The P-Card is to be used for bus circumstances.	siness-related purposes only.	No Personal charges under any
3. I am responsible for all charges entitled to use the P-Card issued in my na	-	erstand that I am the only person
4. I understand that improper use of funds, which may result in disciplinary ac		* * * * * * * * * * * * * * * * * * *
5. I understand that I am responsible Expense Policies. <u>Including maintaining reconciling the monthly statements.</u> Do	g proper itemized receipts.	supporting documentation, and
6. I understand on campus charges fide business purpose with documentation	-	rd and local meals must have a bona ees and the business purpose.
7. I agree to review my P-Card trancorrect fund, organization and account co		
8. I am responsible for resolving an contacting the vendor/supplier, second wi	•	ng the reconciliation process by first ne Purchasing Card Administrator.
9. I am responsible for following p account number are protected from theft of the university Purchasing Card Administration	or loss. I will immediately r	notify Bank of America and then
10. I will surrender the Purchasing proxy or department head/financial management	·	
Cardholder Signature	Print Name	Date
I certify that I will monitor and review the pu Card and PLU Travel and Business Expense cardholder's use of the card if circumstances	policies. I understand it is m	
Financial Manager/Approver Signature	Print Name	 Date