



CALIFORNIA STATE UNIVERSITY
FULLERTON

**Contracts and Procurement
e-Business Programs
Short Term Declining Balance
Procurement Card Application**

Use this form to request a short term Declining Balance Procurement Card

Cardholder's Name:

Telephone # (657) 278-
(Direct Extension)

CWID#:

Building/Room#:

Department:

Purchasing Restriction (*Choose Type*):

Single Purchase Limit:

Maximum DB Pcard Expenditure Limit:

Explanation for single purchase limit over \$500:

Approving Official:

Dates Card is to be Active:

Print Name

From

To

I hereby request a CSUF Procurement Card and agree to abide by the policies and procedures governing the CSUF Procurement Card Program. I understand that I will be personally/financially responsible for any abuse, misuse, or purchase of prohibited items. I also understand that failure to submit all required documents in compliance with Procurement Card policy deadlines may result in revocation of my Procurement Card.

Cardholder's Signature:

Date:

CSUF State ChartField to be used to process expenses:

Account (6) - Fund (5) - Dept ID (5) - Program (4) - Class (5)

Auxiliary Fund to be billed:

Auxiliary Purchase Order #:

(Please Select One)

If you are using an Auxiliary Fund, an Auxiliary purchase order number must be included. You still need to identify the State fund to be used as a guarantee for all Pcard charges that are not accepted by the auxiliary fund. Use for travel expenses requires a travel authorization number issued for the expenditure of State funds because the card is guaranteed by the above referenced State ChartField.

Application Approval

I hereby approve this request for a Procurement Card for the above named Cardholder. I authorize the use of the above referenced CSUF ChartField to guarantee all expenditures made on the Procurement Card associated with this application. I certify that the above referenced Approving Official understands and accepts the role and responsibility as described in the respective program's policy and procedures.

Department Head
or Administrator

Print Name

Title

Signature

Date

Division Head or
Designee

Print Name

Title

Signature

Date

Return the completed application to Contracts and Procurement, CP-300. Contact pcard@fullerton.edu with any questions.

Contracts and Procurement Use Only

Processed by:

Card #:

Process Application

ChartField Setup

Verified Auxiliary Fund Use