

**CALIFORNIA STATE UNIVERSITY, FULLERTON**

**Short Term Declining Balance Pcard 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: Print Name Dates Card is to be Active: 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