

## ILLINOIS TECH REQUEST FOR PROCUREMENT CARD

Application must be approved by the employee's manager and departmental budget manager. Please submit via email to **pcards-group@iit.edu**.

### Cardholder Information/All of the following information is required

Cardholder Name _____ _____ (____) _____ - _____	AXXXX ____-____-____ Last 4 digits of A# / CWID #		
Title and Department _____	IIT Phone Number _____	Date of Birth _____	
Street Address _____	Building & Room # _____	Campus _____	Mother's Maiden Name _____
City _____	State _____	Zip Code _____	IIT Email Address _____

Cardholder's Country of Citizenship \_\_\_\_\_

Cardholder's Home Address: Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

	FUND	ORGANIZATION	PROGRAM																	
FOP Number to Link to Card	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>							<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>						<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>						

Detailed Justification for New PCard: \_\_\_\_\_

### Please Identify the Monthly P-Card Reconciliation Approver Here

Budget Manager Name (please print) \_\_\_\_\_

### Required Approval Signatures for this Application

Applicant's Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
 (please print)

Employee's Manager/Designee \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
 (please print)

### Do not write below this line (to be completed by the Controller's Office)

<p style="text-align: center;"><b>CREDITS</b></p> <p>Monthly Limit \$ _____</p> <p>MCC Groups - Single Transaction Limits:</p> <p>GENERAL \$ _____ TRAVEL \$ _____</p>	<p style="text-align: center;"><b>FOP ACCOUNT</b></p> <p>GRANT ACCOUNT</p> <p><input type="checkbox"/> Yes Expiration Date _____</p> <p><input type="checkbox"/> No Budget Available \$ _____</p>
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### Controller's Office Approval

Approved by: (Please Print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_