

FOOTHILL-DE ANZA COMMUNITY COLLEGE DISTRICT

APPLICATION FOR DISTRICT PROCUREMENT CARD

Office Use Only:
Last 4 digits of card:

Initials and Date:

Cardholder's Name: _____
(As you want it to appear on your card)

Division/Department: _____

Position: _____ F/T _____ P/T _____

Immediate Supervisor: _____

E-Mail Address: _____ Office Phone #: _____

Employee CWID #: _____ Date of Birth: _____

Banner IFOAP: Index: _____ Fund: _____ Orgn: _____ Acct: 4900 Prgm: _____
(6-digits) (6-digits) (6-digits) (6-digits)

Important Note: Procurement cards do not use Foundation FOAPs that start with 844, 845, or 846. Please contact the Foundation Office if you intend to charge your transactions to your Foundation FOAP.

PROCARD STANDARD LIMITS:

\$2,000

Standard Limits will be set as follows: (i.e., \$2,000, \$4,000, \$6,000)

If you require higher default limits, please specify on the line below and have the Authorizing Supervisor initial next to the request. A Credit Limit above **\$10,000** will require further approval by the appropriate Vice President, President or Vice Chancellor.

Note: Authorizing Supervisors have authority to approve an increase to the standard limit of up to \$6,000 per month.

Monthly Credit Limit:	Supervisor's Initials:
\$	

Printed Name of Authorizing Supervisor Extension: _____

Signature: _____ Date: _____
Authorizing Supervisor

**Please return this form to District Business Services.
Questions? Contact Carla Maitland at (650) 949-6202.**