

PROCUREMENT CARD APPLICATION FORM

Instructions

1. Applicant must be a regular WMU employee
2. Complete form
3. Obtain manager approval
4. Forward to Grants & Contracts (if applicable)
5. Send form to Payroll & Disbursements

Contact

Procurement Card Program Administrator
Ian Trautman
acnt-procard@wmich.edu
Phone: (269) 387-4253
Fax: (269) 387-2937

Cardholder Credit Limits (Contact Procurement Card Program Administrator for other limits)

Dollar Limit per Billing Cycle (Monthly): \$5,000

Dollar Limit per Single Transaction: \$5,000

Cardholder Information

Employee Name: _____ Employee WIN Number: _____

Employee E-Mail: _____ Employee ID Number: _____

Department: _____ Employee WMU Phone Number: _____

Procurement Card Information

Name on Card: _____ Default Fund and Department: _____

Second Line Embossing: _____ Alternate Fund and Departments:

1.

Manager Responsible for Approving: _____ 2.

Manager's Email Address: _____ 3.

4.

Manager's Signature: _____ Date: _____

Grant Projects Only

Designation of reserve account (required). Charges will only be made against a reserve account if a purchasing card transaction cannot be documented as a reasonable and allowable charge against a budgeted grant category.

Reserve Fund and Department: _____

Authorized Department Administrator Signature: _____ Date: _____

Grants and Contracts Signature: _____ Date: _____