

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 to acnt-procard@wmich.edu

Contact

 Procurement Card Program Administrator
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:

THIS WILL BE EMPLOYEE'S NAME

Default Fund and Department:

Second Line Embossing:

Alternate Fund and Departments:

1.

2.

3.

4.

Manager Responsible for Approving:

Manager's Email Address:

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:

Date:

Authorized Department Administrator Signature:

Grants and Contracts Signature:

Date:

----- Accounts Payable Use Only -----

 College _____ Completed by _____ Date Completed: _____
 Card Received _____ Card # _____

New User: [] Yes [] No