PURCISHING CARD NEW ACCOUNT INFORMATION RECORD

COMPLETE INFORMATION IS REQUIRED EXCEPT WHERE NOTED AS OPTIONAL

TO ADD NEW ACCOUNT:
1. Indicate "New Account" under Type of Request.
2. Complete all fields on the form.

TO CHANGE INFORMATION ON AN EXISTING ACCOUNT:
1. Indicate Type of Request.
2. Fill in card account number ______________________
3. Fill in current name on card:
4. Complete only the fields to be changed in the following sections.

CARD INFORMATION

First Name ______________________ Middle Initial ______________________
(Embossed on card) (Embossed on card)

Last Name ______________________
(Embossed on card)

Employee ID - 9 characters
(Required)

Organization Name - 19 characters
(Use defaaute - embossed below cardholder name on plastic)

Address - 36 characters

City - 25 characters

State - 2 characters Zip - 5 characters Zip Expansion - 4 characters

Monthly Credit Limit - 6 characters Single Transaction Limit - 6 characters
(Optional)

Home Phone - 10 characters Business Phone - 10 characters

TYPE OF REQUEST:

☐ A. New Account:
☐ B. Address Change
☐ C. Dept/Div./Acct. Code Change
☐ D. Account Closure
☐ E. Name Change
☐ F. Credit Line Adjustment
☐ G. Single Transaction $ Limit
☐ H. Other

AUTHORIZATION

Employee Signature ______________________
Date __________

Supervisor Signature ______________________
Date __________

Agency Purchasing Card Coordinator Signature ______________________
Date __________

State of Montana
P.O. Box 200135
Helena, MT 59620-0135

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**PURCHASING CARD NEW ACCOUNT INFORMATION RECORD**

CARDHOLDER NAME ________________________ EMPLOYEE ID #

DEPARTMENT NAME ________________________ NUMBER

Reporting Hierarchy Code __________________________

**NEW** When ordering a Procard on the USB website, use the Optional 1 & Optional 2 fields for the **user ID #** of the individual who will be reallocating in the SABHRS module (i.e., the Proxy).

Proxy(s)* Name/User ID #

________________________________________

________________________________________

________________________________________

________________________________________

NOTE: If the cardholder has more than two proxies, additional user ID’s will need to be added in the SABHRS Procard Module.

**PROCARD’S DEFAULT ACCOUNTING CODES**

Account __________________________

Business Unit ______________________

Organization ________________________

Fund ______________________________

Subclass __________________________

Project __________________________

* A proxy is the person(s) who will be editing the accounting codes for this individual cardholder in the SABHRS Procard module.