

CAL-CARD PROCUREMENT CARD APPLICATION

Name: _____
Last First M.I.

Work Address: _____
Street Address City State Zip Code

District Site: _____ Department: _____

Work Phone: (_____) _____ - _____

TO BE COMPLETED BY APPROVING OFFICIAL

Default GL Account: _____ Object Code: _____

Transaction Limit: \$ _____ Monthly Limit: \$ _____

DO NOT USE -For Internal Use by Purchasing & Contract Services Only

APPROVED

DISAPPROVED Reason: _____

Training Conducted on: _____

Approved by: _____ Date: _____