

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 ID #: _____ Date of Birth: _____

Banner FOAP: 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:

\$1,000 single purchase/\$2,000 monthly/5 transactions per day/20 transactions per month

If you require higher default limits, please **specify on the line below** and have the Authorizing Supervisor initial next to the request.

Note: Authorizing Supervisors have authority to approve an increase to the standard limit of up to \$5,000 per month.

Single Purchase Limit:	Monthly Credit Limit:	Daily Transactions:	Monthly Transactions:	Supervisor's Initials:
\$	\$			

Printed Name of Authorizing Supervisor Extension: _____

Signature: _____ Date: _____
Authorizing Supervisor

Please return this form to District Business Services. Questions? Contact 650-949-6202.

Updated 4/2013