

FINANCIAL ACTIVITY CREDIT CARD REQUEST FORM

Ministry/Committee: _____ Date: _____

Account # _____ Remaining Budget Balance: \$ _____

Name of Requestor: _____ Requested Amount: \$ _____

Payable To: _____

Purpose: _____

When needed: _____ Card # Last Four _____

User Signature: _____ Approved: _____ Date: _____

FOR ACCOUNTING USE ONLY

Issued by: _____ Date: _____ Issued to: _____ Date Returned: _____

Note

This form will be used for each credit card request. Proper and consistent use of this form will ensure adequate documentation of all financial transactions.

Procedures

- **Verbal request for credit cards will not be honored.**
- Complete form and submit to issuing card holder. Attach invoice or receipts as needed.
- In some cases, your request may not be approved for a variety of reasons. If so, you will be notified as soon as possible.
- Please be reminded, do not exceed the requested amount or deviate from the stated purpose.
- All receipts associated with purchases must be turned in at the time the card is returned.
- If the card is used after office hours, or out of town, it must be returned within 48 hours of the day of receipt or return.
- **ANY INDIVIDUAL WHO USES A CREDIT CARD, AND FAILS TO FOLLOW ANY CARD USAGE PROCEDURE (I.E. CARD RETURN, UNAUTHORIZED PURCHASES, RECEIPT ACCOUNTABILITY, ETC.) MAY HAVE CARD PRIVILEGES IMMEDIATELY REVOKED.**

Please use original request form