

Purchasing Card Request Form

Hamilton College
Purchasing Card Request Form

PLEASE RETURN TO THE BUSINESS OFFICE

_____ OR _____
Name Department

(Card may be issued in name of employee or department)

Work Phone #: _____ Cell Phone #: _____

Date of Birth: _____ Hamilton ID#: _____
(as shown on Hamilton ID card)

Email Address: _____

Employee Who Will Be Authorizing Transactions On-line: _____

Cost Center (first 9 digits of account #) expenses will be charged to:

All information needs to be filled out to prevent a delay in processing the card.

I request a Corporate Card for Purchasing issued under Hamilton College's agreement with Key Bank. I have read Hamilton College's Purchasing Card Policy and agree to comply with the terms and conditions as set out therein. I understand that the card will be revoked if I fail to comply.

Cardholder Name (printed): _____

Cardholder Signature: _____ Date: _____

Vice President Signature: _____ Date: _____

PLEASE RETURN TO THE BUSINESS OFFICE

Internal Use Only

Date ordered _____ Last 4 of Card # _____ Credit limit _____ Proxy _____

Workflow _____ Approver _____ Notifications _____

Received _____ Date _____