

Baylor University
PURCHASING CARD
ENROLLMENT APPLICATION

Complete and return Enrollment Application and User Agreement to
Purchasing Card Administrator
One Bear Place #97084
Or Fax 710-3465

CARD/STATEMENT INFORMATION

Name _____

Cardholder Name on the Card (25 Character Limit)

Print _____

Baylor ID # _____ DOB _____

Mother's Maiden Name or Password _____

Campus Address: One Bear Place # _____ Campus Ph _____

Campus Email _____

Billing Information

Dept ID (default) _____ Acct No _____

Additional Department ID's allowed to charge to, other than default:

APPROVER'S RESPONSIBILITIES:

The approver is responsible for reviewing Purchasing Card transactions on the printed Electronic Statements and verifying that each purchase is in accordance with University policy, is properly coded, is within available budget funds and that proper itemized documentation exists for each purchase made using the Purchasing Card. This documentation is critical to provide audit substantiation. Approvers are also responsible for signing and dating the monthly Electronic Statement. For additional information, the Purchasing Card policy can be reviewed at <http://www.baylor.edu/procurement/index.php?id=45027>.

My signature below certifies that I have read and agree to the responsibilities described above.

Approver's Name (Print) _____

Email Address _____

Dept Name _____ Dept ID _____

Signature _____ Date _____