



STATE OF MISSOURI
 STATEWIDE PURCHASING CARD PROGRAM
 PURCHASING CARD ACCOUNT ACTION REQUEST

CARDHOLDER INFORMATION

CARDHOLDER LEGAL LAST NAME	CARDHOLDER LEGAL FIRST NAME	CARDHOLDER MIDDLE INITIAL
LAST 4 DIGITS OF ACCOUNT NUMBER (Existing Only)		
AGENCY	DIVISION	DISTRICT/FACILITY/UNIT (if applicable)
STATEMENT ADDRESS	STATEMENT CITY, STATE	STATEMENT ZIP CODE
BUSINESS E-MAIL ADDRESS	BUSINESS PHONE NUMBER	BACKUP PHONE NUMBER

ACTION REQUEST

New Card
 Update Account
 Change Strategy
 Change Limit
 Replacement Card
 Close Account

CARD TYPE

Purchasing
 Travel
 Dual Purpose

CARD LIMITS

MONTHLY CREDIT LIMIT			SINGLE PURCHASE LIMIT/STRATEGY		
\$1,000	\$5,000	Permanent	\$1,000	\$5,000	Permanent
\$1,500	\$10,000	Temporary	\$1,500	\$10,000	Temporary
\$3,000	\$25,000	Temporary End Date:	\$3,000	\$25,000	Temporary End Date:
OTHER	\$ _____	_____	OTHER	\$ _____	_____

Physical Card
 Ghost Card
 (Complete for new cards only. Permanent credit limits of \$50,000 or more require a ghost card.)

SPECIAL INSTRUCTIONS

COMMENTS *(Note: Credit limit requests over \$25,000 must include business purpose.)*

CARDHOLDER AUTHORIZATION

CARDHOLDER SIGNATURE	DATE
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AGENCY AUTHORIZATION

AGENCY APPROVAL SIGNATURE	DATE	AGENCY APPROVAL PRINTED NAME
AGENCY PURCHASING CARD COORDINATOR SIGNATURE	DATE	AGENCY PURCHASING CARD COORDINATOR PRINTED NAME

STATEWIDE AUTHORIZATION (For credit limit requests over \$25,000 only.)

STATEWIDE PURCHASING CARD COORDINATOR SIGNATURE	DATE	STATEWIDE PURCHASING CARD COORDINATOR PRINTED NAME
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