



Channel Islands
CALIFORNIA STATE UNIVERSITY

PROCUREMENT CARDHOLDER ACCOUNT MAINTENANCE FORM

Cardholder Name: _____ Unit: _____

Change Information

Change Limits

FIRST NAME

MIDDLE INITIAL

LAST NAME

EXTENSION

ACCOUNTING STRING (ACCOUNT-DEPT –FUND)

NEW APPROVING OFFICIAL NAME: _____

MONTHLY CREDIT LIMIT: \$ _____

DAILY LIMIT: \$ _____

SINGLE LIMIT: \$ 1,000.00

PERMANENT, INCREASE/DECREASE

TEMPORARY INCREASE/DECREASE

DATES TEMP INCREASE/
DECREASE _____

Cardholder Signature

Date

Approving Official Signature

Date

FOR PROCUREMENT OFFICE USE:

Procurement Coordinator Signature: _____ Date: _____

PEOPLESOFT

US BANK

CARDHOLDER NOTIFIED