

AMEX Purchasing Card Request



Instructions

Please return this request form along with the separate completed Delegation of Purchasing Authority for Sponsored Programs AMEX Purchasing Cardholder Memorandum of Understanding Agreement Form: PR-AM02 to:

Office of Sponsored Programs
AMEX Purchasing Card Administrator
1960 Kenny Road, 4th Floor
Columbus, Ohio 43210

The OSP AMEX Purchasing Card will generally arrive within 10 business days upon receipt of this request. Please contact the OSP AMEX Purchasing Card Administrator if you have any questions.

Requestor Information

Cardholder Name	Project Number	ORG Number
Contact Phone	Contact Email	
Transaction Limit <i>Default amount is \$400</i>	Monthly Limit <i>Default amount is \$2,000</i>	

Indicate below the campus address where your monthly statements are to be mailed

Room and Building

Street Address

City	State	Zip
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Signatures

If Cardholder is not the PI or Co-PI, either the PI or Co-PI must provide authorization for the named Cardholder by signing below. Dean/Department Chair authorization is required on all applications.

Cardholder <i>Please print</i>	Cardholder Signature	Date
Dean/Department Chair <i>Please print</i>	Dean/Department Chair Signature	Date
Principal Investigator <i>Please print</i>	Principal Investigator Signature	Date

INTERNAL USE ONLY - Office of Sponsored Programs Approval:

OSP AMEX Purchasing Card Administrator

Date