



P-Card Maintenance Form

This form is used to request changes and updates to Individual or Department P-Card accounts. Complete and sign the form electronically, then email to the Purchasing Department at PCards@lcsc.edu.

Cardholder Information

Individual Card

Department Card

Name on card: _____ Last 4 digits of card #: _____

Permanently Adjust Monthly Credit Limit from: _____ to: _____

Change name on card to: _____

Change Email address from: _____ to: _____

Change P-Card Manager from: _____ to: _____

New P-Card Manager email: _____

Change Dept/Div Head from: _____ to: _____

Card Replacement, due to (indicate reason, such as damaged, not received, embossing error):

Note: Lost or stolen cards must be immediately reported to Bank of America, as indicated in the P-Card Procedure Manual. These cards will be reissued – do not use this form to request replacement.

Purchasing

500 8th Avenue, Lewiston, ID 83501 • Phone: (208) 792-2288 • Purch@lcsc.edu

Policy, Procedures, Training:

All new P-Card Managers, authorized users of Department cards, and Department/Division heads must review and agree to adhere to all State and institutional policies and procedures, as indicated by signature below.

Policies and procedures can be accessed at (<https://www.lcsc.edu/purchasing/employees/p-card-guidelines/p-card-policy-and-procedures>).

All new P-Card Managers, authorized users of Department cards, and Department/Division heads must receive training prior to access being provided.

Signatures

Individual Cardholder Signature:

Department Card Authorized User Signature(s):

Department P-Card Manager Signature:

Department/Division Head Signature:

If the P-Cardholder is a Department/Division Head, signature of their respective Dean, Vice President or President (for direct reporting units) is required.

Dean, Vice President or President Signature:

Purchasing Department Use Only

P-Cardholders, P-Card Managers, and authorized users of Department cards names and dates of training completion.