OLD DOMINION UNIVERSITY
IDEA FUSION

Department of Procurement Services
Purchasing Card (PCard)
PCard Limit Increase Request Form #: 12-006

Section A To be completed by the Cardholder

Cardholder Name: _____

Department Name: _____

Current Transaction Limit: _____ Current Monthly Limit: _____

Cardholder Signature & Date: _____

Note: Cardholders can review and obtain their current limits by accessing the Bank of America Works system online. Steps available in the Reconcile Reports guide on the pcard page.

Section B To be completed by the Cardholder s Approver/Reviewer

Justification for limit increase(s):

_____

_____

I hereby certify that I have examined this cardholder's duties and with the justification provided above request an increase in limit (s) as identified below:

Check the box beside the desired option

- ☐ $4,999 Transaction Limit, $15,000 Monthly Limit
- ☐ $4,999 Transaction Limit, $25,000 Monthly Limit
- ☐ $4,999 Transaction Limit, $50,000 Monthly Limit
- ☐ $4,999 Transaction Limit, $100,000 Monthly Limit

I agree that I will review and approve this cardholder's transactions and supporting documentation on a monthly basis to ensure each transaction is a valid business purchase and adheres to all State and University procurement policies and procedures.

Approver's Printed Name	Approver's Signature	Date
_____	_____	_____

Section C To be completed by the PCard Program Administrator

Approving PA Name & Date: _____

Please scan completed form to *PCard Administrators at* pcardadmin@odu.edu.