

THE TOWER FOUNDATION OF SAN JOSE STATE UNIVERSITY
Procurement Card Application

CARDHOLDER INFORMATION (To be completed by card applicant. Card will be imprinted with this name)	
Last Legal Name	First Legal Name
Department	
4-1129	
Default Phone Number	Extended Zip Code
<ul style="list-style-type: none">● I agree to accept responsibility for the proper use of the Procurement Card and agree not to use the card for personal purchases or unauthorized expenditures.● If my card is lost or stolen, I will notify the Tower Foundation immediately.● I will surrender my Procurement Card to Tower Foundation upon termination of employment or upon reallocation of duties which do not necessitate my continued use of the card.	
X Cardholder Signature	Date

DEFAULT TOWER ACCOUNT NUMBER

ACCOUNT HOLDER INFORMATION	
Account Holder Name	
<ul style="list-style-type: none">● I hereby authorize the applicant listed above to use the Tower Foundation Procurement Card as a procurement tool to acquire goods and services.● I agree that any and all charges made by the cardholder will be billed directly to my Tower account and an administrative charge will be assessed on the expenditures. The above default Tower account number will be used for the billing.● I understand that the use of the card may be terminated at any time at Tower Foundation's sole discretion.	
X Authorized Signature	Date

TF approval _____ Date _____