REQUEST FOR TEMPORARY PMU WHITE A/R CHARGE CARD

Please complete all sections. If you have any questions, please call 48971.

1) Name of Event or Group: _____

2) Card Activation Dates: From: _____ To: _____
The PMU Business Office needs to receive this form at least one week in advance of activation date.

3) Fill in limitation amounts per transaction swipe.

Breakfast 6:00 am to 10:30 am _____

Lunch 10:30 am to 3:00 pm _____

Supper 3:00 pm to 1:00 am _____

4) Circle locations where card may be used and provide estimated numbers of customers per unit:

Rack & Roll		Pappy's		Flatbreads		Beans	
All Food Units		Sagamore		Zia		Port	
Urban Market		Oasis		Stewart		Venture	
Starbucks		LaSalsa		Vet Vittles		Undergrounds	
Villa		Lemongrass		Bistro		Amelia's	

5) Circle method of delivery of cards.

Deliver cards to retail locations Other (please explain in detail): _____
The PMU Business Office reserves the right to deliver cards to retail locations for large groups.

6) Circle the method of identification for cards held at retail location.

Badge Ticket Verbal *Not recommended*

7) Student Organization's Name: _____

8) PMU Accounts Receivable Number: _____
The charges from use of the card(s) will be billed to the PMU Accounts Receivable Number listed above.

9) Contact Name: _____ Phone # _____

Signature of Person Requesting Card: _____

Signature of <u>President and Treasurer</u> or <u>Advisor</u>: _____

Signature of BOSO: _____

Return completed form to the Purdue Memorial Union, Room 216, or fax to 48966.

PMU BO USE ONLY:

Signature of PMU BO: _____

_____ # of Cards Made Exempted? Yes or No

_____ Card # Assigned _____ Virtural Room Assigned

_____ PMU Accounts Receivable Number Date Deleted _____

Distribution after approval: Head Cashier and Rack and Roll Last modified 1/25/08