

Rose-Hulman Institute of Technology

Request for Changes to Cardholder Limits

Cardholder name as it appears on the account _____

Department _____

Cardholder's extension _____

Requested Cardholder Controls

Credit Limit (CSL) \$ _____ Single Purchase Limit \$ _____
(Maximum of \$2499)

Authorizations Per day _____ Transactions Per Cycle _____

Dollars Per Day \$ _____

Cardholder Approvals

Budget
Manager: _____ *Signature:* _____ Date _____
(Please Print)

Approved By: Dan Wells _____ *Signature:* _____ Date _____
(Please Print)