

Application for the American Express Corporate Card

APPLICATION INFORMATION – APPLICATION CANNOT BE PROCESSED WITHOUT REQUIRED FIELDS

Name as you would like it to appear on the card (20 characters maximum, including spaces * Required)

Billing Street Address (20 characters maximum, including spaces * Required)
Cardholders may not use Georgia State University as a billing address.

City (17 characters maximum, including spaces) State Zip code

Social Security Number (*Required)

Home/Personal Phone # (*Required)

Business Phone Number (*Required)

X

Employee's Signature

Date

Employee's Title

Note: By signature on the application, the immediate supervisor certifies that the card is needed by applicant when traveling on official business for GA State University.

Approver's Name

Date

X

Approver's Signature

Approver's Title

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Please read the agreement before signing. By signing above, I indicate my acceptance of Terms and conditions of the Agreement. All applications require a signature (name & title). Return the completed form to the Georgia State University Purchasing Department.

AGREEMENT:

Company and the Applicant (a) request that a Corporate Card be issued to the Applicant (b) authorize the receipt and exchange of credit information on the Company and the Applicant (c) agree to be bound by the Agreement sent with the Card and by the Agreements covering Corporate Card related programs in which the Applicant is enrolled, and (d) agree that the Corporate Card will be used for business or commercial purposes only. The Applicant (a) authorizes American Express to notify the company if this application is declined or if spending restrictions are applied to the Corporate Card and (b) agrees to be liable for payment to American Express of all amounts charged to the Corporate Card.

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