

Controller's Office Program Expense Card Request Form

ELIGIBILITY REQUIREMENTS:

- ► All expenses must be approved University program expenses
- ► Applicant must be a USC employee
 ► Department Head approval

- Training Session Attendance
 Signature on Cardholder Agreement & Procedures (upon issuance of card)

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40T NAME		LEGAL FIRST	AND LAST I	NAME REQUIRED)		
LAST NAME				CAMPUS			
FIRST NAME				DEPARTMENT NAME			-
CELL PHONE				DEPARTMENT ADDRESS			
OFFICE PHONE							
EMAIL				CARDHOLDER LIAISON(S) - NAME & USC ID			
JSC ID				-			
DESCRIPTION OF IN	NTENDED USE:]
	1					-	
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OPERATING UNIT	DEPARTMENT	FUND	CLASS		PROGRAM	INCENTIVES	
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