



Henderson County Procurement Card Form

New Card

Replacement Card

Temporary Card

Employee Name	
Employee Number	
Title	
Department	
Phone	
Email	
Credit Limit	
Justification	

Date:	Department Head:
-------	------------------

Date:	Finance Director:
-------	-------------------

The card holder has read and understands the Henderson County Procurement Card Policy and agrees to all terms outlined in the Policy. I understand and agree that the Procurement Card is issued to me with the express understanding that I will, at all times, comply with the Procurement Card Policy.

Date:	Card Holder:
Card Holder is to appear in person with identification to receive the card in Finance and sign above.	

Please return the completed form to the Purchasing Agent by email or interoffice mail.
Purchasing Agent: Doug Guffey, Finance Department
dguffey@hendersoncountync.org