

University of Louisville Travel Card - Spending Limit Change Request

A Department LFO **cannot** approve an increase on their own card; that approval must come from someone at a higher level.

Cardholder LAST Name:

Cardholder Employee ID #:

Cardholder E-Mail Address (@louisville.edu):

Cardholder's Phone:

Card Number (Last 8):

This request is:

- Temporary
- Permanent

Requested Transaction Limit:

If temporary, indicate the date the transaction limit should revert back to the default:

Requested Monthly Limit:

If temporary, indicate the date the monthly limit should revert back to the default. Monthly limit end dates must coincide with the end of a billing cycle.

Justification/explanation for the requested increase:

Name of LFO who will approve this request:

LFO's Email Address (@louisville.edu):

LFO's Signature:

****Please send completed and signed form to travel@louisville.edu.****