Smartsheet ProCard Form Submission Process

1. To access a ProCard Form, please go to our Forms page (https://louisville.edu/procard/forms).
2. Click on the link to the form you need to fill out.
3. The below forms will be linked to the Smartsheet form called ProCard Forms.
    - **Billing Address Change**
    - **Certificate of Destruction**
    - **Default SpeedType/Account Code**
    - **Grant Renewals**
    - **Lost or Stolen Card Notifications**
    - **Spending Limit Changes**
4. The **Employee Usage Agreement** form will be linked to the Smartsheet form called Employee Usage Agreement. See Step 12 for more details.
5. The link will open to the online form and the following fields will appear and need to be filled out. Anything with a red asterisk (*) is a required field.
    a. **Cardholder LAST Name** – the cardholder's last name
    b. **Cardholder Empl ID #** – the cardholder's 7-digit employee ID number (this is a number only field)
    c. **Cardholder Email Address** – cardholder's UofL email address (must be in correct email format)
    d. **Last 8 Digits of Card Number** – the last 8 digits of the card number (this is a number only field) – please <u>DO NOT</u> enter the full 16-digit card number
    e. **Is the person submitting this form the cardholder?** – Yes or No
        i. If you select ***No***, another field will appear for you to enter your email address as the submitter. Only select ***No*** if you are not also the cardholder.
    f. **What type of form do you need to fill out?** – select from the dropdown list. Once you have selected the form you would like to fill out, additional fields will populate below the dropdown.
6. For <u>Billing Address Change</u> forms, fill in the required fields for the new address.
    a. **Address Line 1** – example: 2211 South Brook Street
    b. **Address Line 2 (optional)** – example: Houchens Building, LL07
    c. **City and State** – example: Louisville, KY
    d. **Postal Code** – example: 40292

7. For Certificate of Destruction forms, fill in the required fields.
    a. **Reason for canceling** – Provide a short explanation for canceling the card.
    b. **Type of Card** – Individual or Department
    c. **Cancel Card** – Choose from the three options:
        i. Cancel card. Do NOT reissue.
        ii. Cancel card. Order a replacement card.
        iii. Card expired. Replacement received.

8. For Default Speedtype/Account Code Change forms, fill in the required fields.
    a. **Please select default change type** – SpeedType, Account Code, or Both
    b. **Current default speedtype/account code** – examples:
        i. **If change type is SpeedType**: 10631
        ii. **If change type is Account Code**: 541200
        iii. **If change type is Both**: 10631 / 541200
    c. **NEW speedtype/account code** – examples:
        i. **If change type is SpeedType**: 30339
        ii. **If change type is Account Code**: 541300
        iii. **If change type is Both**: 30339 / 541300
    d. **Reason for Change** – please provide a brief explanation of the need to change your default SpeedType/Account Code.
    e. **Name of Dept Head/Chair who will approve the request** – first and last name of the Department Head/Chair
    f. **Email address of Dept Head/Chair** – UofL email address; can either be full name email or user ID email – examples below:
        i. Full name email: brittany.schmitt@louisville.edu
        ii. User ID email: baschm06@louisville.edu
    g. **Department LFO (for 2nd Approval Routing)** – you can include an optional 2nd LFO approver, and an approval request will be sent to the LFO email contact based on the department you select. The Department LFOs listed on the form are based on the Schedule of Lead Fiscal Officers.
    h. The Department Head/Chair you list on the form will receive an email with a link to approve or deny the request. Once the Department Head/Chair has given their approval, if you selected the LFO contact as a second approver to this form, another approval request will be sent to the LFO selected.
        i. If approved, the cardholder, submitter, approver, and ProCard Office will be notified via email that the request was approved.

    ii. If denied, the cardholder, submitter, approver, and ProCard Office will be notified via email that the request was denied. The cardholder/submitter can follow up with the approver or ProCard office should they have any questions about their request being denied.
    iii. Once approved, the ProCard Office will process the form, then the cardholder, submitter, and approver will receive an email letting them know the form was completed by our office.

9. For Grant Renewal forms, fill in the required fields.
    a. **New Grant Expiration Date** – type in the date using the format MM/DD/YYYY or use the calendar icon to pick the date.
    b. **Current SpeedType** – enter the grant SpeedType currently tied to the card
    c. **New SpeedType** – enter the new grant SpeedType you would like associated with the card
    d. **Comments** – Enter in comments for the request

10. For Lost or Stolen ProCard Notification forms, fill in the required fields.
    a. **Card Was:** – Lost or Stolen
    b. **Provide explanation of events that preceded the card being lost or stolen** – Provide a brief explanation of the events (when last used, where last used, where it was stored, etc.)
    c. **Did you call PNC and report the card as Lost/Stolen?** – Yes or No
        i. Normally, you would only call PNC if the card were lost/stolen after normal business hours. Otherwise, the ProCard Office should be notified first via this form.
        ii. If you did not call PNC, select **No**
        iii. If you did call PNC, select **Yes** and another question will appear.
    d. **Was PNC able to close the card and reissue it or did they request you to reach out to our office?** – Yes or No
        i. Yes, they closed and reissued a new card.
        ii. No, a ProCard admin needs to reach out to PNC to reissue a new card.
    e. **For cards presumed to be stolen on campus, was Public Safety notified?** – Yes, No, N/A
        i. Choose **N/A** if the card was not lost/stolen on campus

11. For Spending Limit Change Request forms, fill in the fields appropriate for the request.
    a. **Cardholder Phone** – enter the cardholder's 10-digit phone number
    b. **This request is:** – Temporary or Permanent
        i. If you select **Temporary**, additional fields will populate to enter the date the transaction/monthly limits should be reverted to the card's standard limits.
    c. **Requested Transaction Limit** –fill in if you need to request an increase for the transaction limit of the card.

i. **If Temporary, indicate the date the transaction limit should revert to the default.**

d. **Requested Monthly Limit** – fill in if you need to request an increase for the monthly limit.

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

e. **Justification/explanation for the requested increase and include why this is considered essential spend.** – Provide details of the purchase you are needing to make with the increase (the item(s) to be purchased, unit cost (approximately), vendor, business purpose etc.)

f. **Is the transaction limit over $4,500?** – Yes, No, N/A

i. If the Requested Transaction Limit field is over $4,500, select **Yes**.

ii. If the Requested Transaction Limit field is NOT over $4,500, select **No**.

iii. If you are only requesting a Monthly Limit increase, select **N/A**.

g. If you select **Yes** to the question above, another field below will appear called **For transaction limits that are over $4,500:** – Please provide an answer to the questions from this field.

i. For our auditing purposes, would you please verify that Capital Assets will not be purchased with this increase?

ii. If this is a software purchase, has this been reviewed by Purchasing and approved for purchase with the ProCard?

h. **(OPTIONAL) Attach a copy of the invoice/quote:** – If you have one available, you may attach a copy of the invoice/quote. This will reduce any back-and-forth communication between the cardholder/submitter, approver, and the ProCard office.

i. **Department LFO who will approve this request** – an approval request will be sent to the LFO email contact based on the department you select. The Department LFOs listed on the form are based on the Schedule of Lead Fiscal Officers.

j. The Department LFO chosen on the form will receive an email with a link to approve or deny the request.

i. If approved, the cardholder, submitter, approver, and ProCard Office will be notified via email that the request was approved.

ii. If denied, the cardholder, submitter, approver, and ProCard Office will be notified via email that the request was denied. The cardholder/submitter can follow up with the approver or ProCard office should they have any questions about their request being denied.

iii. Once approved, the ProCard Office will process the form, then the cardholder, submitter, and approver will receive an email letting them know the form was completed by our office.

12. For Employee Usage Agreements, fill in the fields appropriate for the request.

a. **Submitter Email Address** – enter the email address for the person submitting the form.

b. **File Upload:** – upload the completed, signed employee usage agreement to the form.

c. **Comment** – this part is optional, but you can include a comment with this form.