
MERCHANT DEPARTMENT EQUIPMENT REQUEST

Other, please explain:

4. Will any other departments, software packages, or outside vendors be involved in the processing of credit card payments? If so, please identify all parties and describe their roles and responsibilities.

5. Indicate the credit card type(s) the department would like to accept and process.

- Visa
- Master Card
- Discover
- American Express
- Other, please list.

6. List the physical address where the equipment will be located.

7. Indicate the account code to be used for the cost of the equipment.

NOTE: If applicable, for approval of any web-based credit card processor to ensure our network is compatible with the processor and software to be utilized.

DEPARTMENT SIGNATURES

*I understand that it is my responsibility to be familiar with the laws and regulations of the University of Louisiana at Lafayette and **Funds Handling Guidelines** in its entirety and agree to adhere to all of the requirements of the policy. I also agree to adhere to the laws and regulations of the State of Louisiana.*

The information provided within this document is accurate to the best of my knowledge and I approve the request to purchase deposit,

All requests and supporting documentation should be submitted to:

Carrie Hebert
Cash Compliance Analyst
Financial Services
Martin Hall, Room 155A
P.O. Box 40400
Lafayette, LA 70504
337-482-6287 carrie.hebert@louisiana.edu
Website: <http://financialservices.louisiana.edu/>

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