

Managing account maintenance form Purchasing

Government Services

Select one:

3059 (Visa) 8203 (Mastercard) Change Closure:

Please select type of closure, if applicable: T9 Permanent V9 Temporary Please fax all pages to:

701-461-3466 or 866-457-7506 Or mail request to:

U.S. Bank Government Services PO BOX 6347

Fargo, ND 58125-6347

Email: gov.service@usbank.com

Company number:				
Managing account number: Managing account name:				
Information to be changed				
Contact name:(name 1)	(maximum 24 characters)	Agency/Organization nam	ne: (embossed on plasti	c – maximum 21 characters)
Address 1:	(maximum 35 characters)	Address 2:		(maximum 35 characters)
City:(maximum 25 characters)	State: (maximum 2 characters)	ZIP code:(maximum 9 characters)	_ Country:	(maximum 3 characters)
Business phone number:	(maximum 10 characters)	Overseas phone number:		(maximum 18 characters)
Fax number:	(maximum 18 characters)	Email Address:		(maximum 60 characters)
Credit limit: \$		Cycle limit: \$		
Authorization limits (optional)				
Daily transaction limit:		Single purchase limit: \$		
Cycle transaction limit:		Daily purchase limit: \$		
Monthly transaction limit:		Monthly purchase limit: \$_		
Quarterly transaction limit:		Quarterly purchase limit: \$	S	
Annual transaction limit:		Annual purchase limit: \$		
Default/Master accounting code (max. 1	50 char.)			
First segment of accounting code:				
Second segment of accounting code:				
Third segment of accounting code:				
Fourth segment of accounting code:				
Fifth segment of accounting code:				
Sixth segment of accounting code:				
Form submitted by				
Name (print/type):		Phone:	Fax:	
Signature:		Email:		
Date submitted:				