



NAB CORPORATE CREDIT CARD AUTHORITY

Please complete and forward to CDF

School Name
Cardholder Name
Email Address
Position Held **Limit required** \$

List all existing cardholders (to be cancelled Y/N)

Name	Position	Limit	Cancel Y/N	Transfer Y/N

Please ensure cancelled/replaced cards have been destroyed

Purpose of this request (please tick)

- New Application**
Cardholder request attached – must be signed by Principal. If corporate card is for the Principal then application must be signed by Business Manager/Finance Officer and CEO Director of Finance
- Increase Limit – existing limit**
Cardholder request attached signed by Business Manager or Principal \$
- Transfer of Card**
Previous school name

Important Information for new cardholders;

- PINs will be issued to all cardholders
- New cardholders will receive a login and password to enable access to your credit card statement through flexipurchase.com (**no paper statements are issued**).

For transfers & limit increases - signed by Principal or Business Manager/Finance Officer of new school;

Sign
Name
Title