



**MISSISSIPPI DEPARTMENT OF FINANCE AND ADMINISTRATION
OFFICE OF PURCHASING, TRAVEL AND FLEET MANAGEMENT
TRAVEL CARD PROGRAM**

APPLICATION FORM FOR TRAVEL CARD PROGRAM

Check one: **State Agency/University** **Governing Authority** **School District**

Agreement & Acceptance

_____, an entity in the State of Mississippi (the "Agency") and identified in this ENTITY TRAVEL CARD PROGRAM AGREEMENT hereby requests UMB Bank, n.a., Kansas City, Missouri, or its successors or assigns ("UMB" or "Issuer"), to establish a credit card authority for the entity pursuant to which Issuer will open one or more credit card accounts ("Account(s)") in the name of the entity and will issue one or more commercial credit cards or card numbers ("Card(s)") to the entity and/or employees or agents of the entity (collectively, "Employees") to be used for official and approved entity-related business, commercial or agricultural purposes. The person who signs this Application on behalf of the entity represents he or she is duly authorized by the entity to sign this Application and to bind the entity for repayment as required and to comply with the Provisions and Terms Governing Accounts as set forth and as described herein.

The entity authorizes Issuer to investigate the entity's creditworthiness and payment history and to otherwise verify the information contained in this Application. The entity certifies that all information contained in this Application is true and correct.

Two Signatures are Required

Signature of Program Coordinator	Printed Name of Program Coordinator and Title	Date Signed
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Signature of Entity Head	Printed Name of Entity Head	Date Signed
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Name of Entity	
FEIN-Tax ID Number	
Mailing Address	
Physical Address	
City/State/Zip	
Billing Recipient and Email Address	
Estimated monthly Agency limit required	
Agency Telephone Number	
Program Coordinator Name /Email Address and Telephone Number	
Please supply web link to most recent Annual Financial Report or attach paper copy (Governing Authorities and School Districts Only) Total Limits greater than the State Agency/University's pre-authorized amounts may require an updated State Agency/University Resolution authorizing the program.	

Office of Purchasing, Travel and Fleet Management Approval

This request has been reviewed and approved by the Mississippi Office of Purchasing, Travel and Fleet Management for further processing by:

Signature of Authorizing Officer	Printed Name of Authorizing Officer and Title	Date Signed
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DISCLOSURE INFORMATION

[REDACTED]

Does not apply

[REDACTED]

Does not apply

[REDACTED]

The entire balance due shown on each Monthly Statement must be paid in full each month

[REDACTED]

Two-cycle average daily balance (including new purchases)

[REDACTED]

There is no annual fee for this account

[REDACTED]

There is no minimum finance charge for this account

[REDACTED]

Late Fee: There is no late fee charge for this account.

Cash Advances are not allowed on this account

IMPORTANT: The information about the costs of the cards described above is accurate as of March 1, 2012, the date this document was published and made available as a downloadable file. This information may have changed after that date. To find out what may have changed, write to us at UMB Bank, n.a. at 928 Grand Boulevard, Suite 501, Kansas City, Missouri 64106 or email us at our commercial card website at www.umb.com.