



UNIVERSITY OF South Carolina

The University of South Carolina Bursar's Office

Bursar's Office Date Stamp

Store ID # \_\_\_\_\_

UStore/UPay Detail Code Request

Please email completed form to: Thomps55@mailbox.sc.edu

\*\*\*\*\*Please send original to 1244 Blossom Street, Suite 128\*\*\*\*\*

Department Name: \_\_\_\_\_

Business Manager Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

Store Name: \_\_\_\_\_

Store Display Name: \_\_\_\_\_

DEPARTMENT AND FUND INFORMATION FOR MARKETPLACE USAGE

Each Marketplace site must have a Banner Detail Code for the account to which payment transactions are posted.

Contact the Budget Office if needing a new account setup. Please provide accounting information for:

Revenue: Department: Fund: Operating Unit: Class: Account: Credit Card Fees: Department: Fund: Operating Unit: Class: Account: 54230

AUTHORIZATON

I have read and reviewed the information provided in the request. By signing this request form for Marketplace. I certify that I understand all parts of it and have answered all questions completely and fully. I understand that if the Department or College information provided in this request for Marketplace changes, I will notify the Bursar's Office. In addition, I acknowledge that the eCommerce Marketplace Guidelines and all USC Policies have been reviewed and are accepted.

If I am in doubt about a request, I will consult with my supervisor prior to releasing the information.

My signature denotes that I have read and understand the above statement.

(Business Manager) (Title) (Date)

(Dean/Director Approval) (Title) (Date)

(University Bursar's Office Approval) (Title) (Date)