



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

AUTHORIZATION

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)