



California State University, Long Beach  
**Staples Account Request Form**

REQUEST TYPE: ☐ New User ☐ Modify User

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### USER INFORMATION

Asterisk (\*) indicates required field.

CSULB ID\*: \_\_\_\_\_ First Name\*: \_\_\_\_\_ Last Name\*: \_\_\_\_\_ Phone: \_\_\_\_\_ Dept ID: \_\_\_\_\_

SHIP TO LOCATION\*: \_\_\_\_\_ (For example, BH-335 -- use defined list at XXXXXXXX)

To list additional Ship To Locations, please add them to the back side of this form.

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### CHARTFIELD DEFAULT

Enter the Chargeback Code/SpeedChart to be used as the default for all Staples office supply purchases.

SpeedCharts: PeopleSoft/CFS Menu>CSU Administer Integration>CSU Chargebacks>SpeedChart - Find an Existing Value.

Note: If SpeedChart/Chargeback is not available, submit a [Chartfield and Trust Fund request form](#).

To list additional SpeedChart numbers, please add them to the back side of this form.

Default Chargeback Code (SpeedChart) \_\_\_\_\_ Alternate Chargeback Code \_\_\_\_\_  
Alternate Chargeback Code \_\_\_\_\_  
Alternate Chargeback Code \_\_\_\_\_

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### APPROVAL THRESHOLD

Individual identified below is authorized to approve Staples office transactions submitted by user above.

First and Last Name: \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_

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### APPLICANT AGREEMENT

☐ By checking this box, I certify that I, the Staples user applicant, will follow the purchase guidelines and processes as defined in the [Delegation of Purchasing Authority](#) and that I will only make purchases that are reasonable and necessary for the department's operations and the University's mission.

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### ADMINISTRATOR APPROVAL

☐ By checking this box, I certify that I grant the user the authority to make purchases on behalf of the department and will ensure that all activity is reasonable and necessary for the department's operations and the University mission.

Administrator: \_\_\_\_\_ Date: \_\_\_\_\_ Comments: \_\_\_\_\_

Administrator Email: \_\_\_\_\_

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### STAPLES REQUEST COMPLETED BY

Account Administrator: \_\_\_\_\_ Date: \_\_\_\_\_ Comments: \_\_\_\_\_

Send this document as an attachment to the Staples Administrator for processing:

LBCMP - Marcella.Alvear@csulb.edu

LBFDN - Kimberly.Mowl@csulb.edu