



University of Alaska Fairbanks

P.O. Box 757640, Fairbanks, Alaska 99775-7640

TransFirst Credit Card Equipment Request Form

Campus: UAF	Billing Address: PO Box 757920
Department Requesting:	Fairbanks, AK 99775-7920
Responsible Party:	Contact Person: Ana Brown
Phone: Email:	Phone: 907-474-6191 Email: aubrown@alaska.edu
Address of Physical Location:	MID# (completed by Bursar's Office):
,	
Fund/Org to be charged:/_	
Number of terminal(s) requested:	
ProcessNow Card Reader for UA locked iPad, iPhone or Andriod (\$49.99):	
 VeriFone Vx520 – EMV Compatible (\$299.00): 	
 VeriFone Vx680 Wireless Terminal – GPRS 3G, EMV Compatible (\$699.95): 	
Ingenico iCTT250 – EMV Compatible (\$329.00):	
Ingenico iWL250 Wireless Terminal – GPRS 3G, EMV Compatible (\$799.95):	
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By signing below, I attest that I will sign and forward a PCI Security Agreement Form to the Bursar's Office within one week of	
request. By doing so, I understand this means I have read and understans the University of Alaska Accounting and Administrative Policy for Payment Card Industry (PCI). Furthermore, I understand that failure to do so may result in a loss of credit card	
processing privileges.	
All university employees and authorized TXP/TransLink users are responsible for the security and confidentiality of university data,	
records, and reports. Individuals who have access to confidential data are responsible for maintaining the security and confidentiality of	
such data as a condition of their employment. The unauthorized use of, or access to, confidential data is strictly prohibited and will subject the individual to disciplinary action up to and including termination and prosecution to the fullest extent permitted by law.	
I have read and fully understand the above statement and shall comply with said statement and rules.	
Name:Signature:	Date:
FBO Approval:	Date:
FBO Approval: Date:	

