

Virtual Card Spending Limit Increase Request



Dear Cardholder,

In order to fulfill your request to increase your ***Virtual Card Spending Limit***, please fill in the following information:

Cardholder Name		Epassporte User ID	
Virtual Card #		Email Address	
Single Cash Transaction Limit Desired	\$		

In addition, we require a copy of:

1. A government issued photo ID (containing a legible signature)
2. Front/Back of each load card on account
3. The last statement of each load card on account

Please fax all documents, along with the signed and dated request form to 1-310-943-2410.

Alternatively, you can email the documents as an attachment to: cs@epassporte.com.

Scanning/emailing works best.

By signing this document you acknowledge that you are the primary account holder and owner of the ePassporte account mentioned above.

Signature: _____

Date: _____