

## Purchasing Card Change Form

Complete Section 1 and Section 6, and then choose the appropriate section to complete based on the desired purchasing card account change. If you have any questions, contact the Purchasing Card Manager. Once the form is completed, submit it to the Purchasing Card Manager.

	Section 1: Personal Infor	rmation
Cardholder Name (as shown on Purchasing Card):	Department:	Purchasing Card Number (last four digits only):
Campus Phone Number:	Email Address:	_
Section	on 2: Close Purchasing C	ard Account
Close purchasing card account for the following reason (e	e.g. change job, lack of use, leav	e University):
Date to close purchasing card:		
**For Section 2 changes, this form and your purchasing ca	ard must be <b>hand delivered</b> to t	he Purchasing Card Manager.
Section	3: Change or Update Car	rdholder Name
New/Updated Name (as it should appear on new card):		
Section 4: Change Default (	Organization and Fund ar	nd/or Add additional Organizations
**Each card is required to have a default fund and organiz	zation, however multiple organiza	ations may be listed and used on the account.
Current Default:	New Default:	Additional Organizations:
Organization Fund C	Organization Fund	Organization
		Organization
Section	5: Change Reconciler ar	nd/or Approver
New Coordinator Information:		New Dept. Head / Dean Information:
Name:		
Department:		
	Section 6: Certificati	on
I request the changes noted above to my purchasing card	account and certify that all infor	rmation provided is correct.
Printed Name of Cardholder	Cardholder Signature	Date
Printed Name of Coordinator	Coordinator Signature	Date
Printed Name of Department Head / Dean	Department Head / Dean	Signature Date
To Be Comp	leted by the Purchasing (	Card Administrator
Printed Name of Purchasing Card Manager	Purchasing Card Manage	r Signature Date