

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 Information

Cardholder Name (as shown on Purchasing Card):	Department:	Purchasing Card Number (last four digits only):
_____	_____	_____
Campus Phone Number:	Email Address:	
_____	_____	

### Section 2: Close Purchasing Card Account

Close purchasing card account for the following reason (e.g. change job, lack of use, leave University): \_\_\_\_\_

Date to close purchasing card: \_\_\_\_\_

**\*\*For Section 2 changes, this form and your purchasing card must be hand delivered to the Purchasing Card Manager.**

### Section 3: Change or Update Cardholder Name

New/Updated Name (as it should appear on new card): \_\_\_\_\_

### Section 4: Change Default Organization and Fund and/or Add additional Organizations

**\*\*Each card is required to have a default fund and organization, however multiple organizations may be listed and used on the account.**

Current Default:		New Default:		Additional Organizations:
_____	_____	_____	_____	_____
Organization	Fund	Organization	Fund	Organization
				Organization

### Section 5: Change Reconciler and/or Approver

	New Coordinator Information:	New Dept. Head / Dean Information:
Name:	_____	_____
Department:	_____	_____

### Section 6: Certification

I request the changes noted above to my purchasing card account and certify that all information 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 Completed by the Purchasing Card Administrator

Printed Name of Purchasing Card Manager	Purchasing Card Manager Signature	Date
_____	_____	_____