



PURCHASING CARD FORM – CHANGE REQUEST

Please print and send form, duly completed and signed, to Procurement Services, Card Administrator, 1 Nicholas, room 500.

| SECTION 1 - APPLICANT INFORMATION | | |
|-----------------------------------|-------------|------------------|
| Last Name: | First Name: | Employee number: |

| SECTION 2 – REQUESTED CHANGE | | |
|---|-------|-----|
| Card to modify (8 last digits only) : <u> X X X X </u> <u> X X X X </u> _____ | | |
| <input type="checkbox"/> Transaction limit | FROM: | TO: |
| <input type="checkbox"/> Cycle limit | FROM: | TO: |
| <input type="checkbox"/> Default FOAP | FROM: | TO: |
| <input type="checkbox"/> Termination Date | FROM: | TO: |
| <input type="checkbox"/> Other | | |

| SECTION 3 – SIGNATURES AND APPROVALS | | | | |
|--------------------------------------|-----------|------------|-------|------|
| | Signature | Print name | Title | Date |
| Buyer- payer: | | | | |
| Approver: | | | | |
| Designated co-ordinator | | | | |
| Director | | | | |
| CAO | | | | |

| SECTION 4 – HIGHER LIMIT APPROVALS | | |
|---|---|--|
| <input type="checkbox"/> \$ 30,000 (30 day cycle limit) | <input type="checkbox"/> \$ 50,000 (30 day cycle limit) | <input type="checkbox"/> Over \$ 50,000 (30 day cycle limit) |
| Director, Procurement Services | Associate Vice-Rector Resources | Vice-Rector Resources |
| Signature: | Signature: | Signature: |
| Date: | Date: | Date: |

| SECTION 5 – FOR CARD MANAGER USE ONLY | | |
|---|-----------|------|
| | Signature | Date |
| <input type="checkbox"/> Application change / <input type="checkbox"/> Bank – change | | |
| <input type="checkbox"/> Security - <input type="checkbox"/> FAST / <input type="checkbox"/> Bank | | |
| <input type="checkbox"/> Card delivery / <input type="checkbox"/> Cardholder agreement | | |
| <input type="checkbox"/> ListServ / <input type="checkbox"/> Statistics | | |

□ MCC GROUPS :