

REQUEST FOR CARD/ CARD DETAIL CHANGE

Purchasing Card Program

Instructions:

- This form is to be completed by the Employee and Purchasing Card Coordinator to request a new Purchasing Card or to request a change to an existing card.
- This request must be approved by the Senior Financial Officer (or designate).
- For further information, refer to **Core Policy and Procedures Manual (E.6)**.
- **Please type or print clearly.**

MINISTRY NAME

TYPE OF REQUEST

 APPROVAL FOR
NEW CARD

 NOTICE OF
CHANGE

EMPLOYEE (Cardholder) INFORMATION

NAME (Last Name, First Name and Initial)

GOVERNMENT EMPLOYEE ID NO.

OFFICE ADDRESS (Mailing Address)

OFFICE PHONE NO.

()

OFFICE EMAIL ADDRESS

CARDHOLDER NUMBER (Required only if changing existing card information)

CARDHOLDER SIGNATURE

 DATE SIGNED
YYYY / MM / DD

X
AUTHORIZATION

MONTHLY LIMIT

PER TRANSACTION LIMIT

\$

\$

EXPENSE AUTHORITY SIGNATURE

NAME

PHONE NUMBER

 DATE SIGNED
YYYY / MM / DD

X

()

PURCHASING CARD COORDINATOR SIGNATURE

NAME

PHONE NUMBER

 DATE SIGNED
YYYY / MM / DD

X

()

ADDITIONAL ACCOUNT SET-UP INFORMATION

REPORTING UNIT (Hierarchy) NAME

HIERARCHY NUMBER ('Reports To' Profile)

COMMENTS