



The University of Georgia

P-CARD Change Request Form

Date: _____ Cardholder Name ¹: _____ Last 4 Digits of Card: _____

Cardholder Phone No: _____ Cardholder Email Address: _____

Department Name: _____ (3-Digit) Dept. Code: _____

ACTION REQUESTED:

Change Default Account Number to: _____ (Restricted accounts require prior approval by C&G) _____
(C&G Signature)

Cancel Card (include reason or date leaving UGA) _____

Does the individual hold an active role for other card(s) Yes No If yes, indicate the role(s) to remain active **DH** **FAC** **AO**

Change the Single Transaction Limit (STL) Current STL: \$ _____ New STL: \$ _____ [\$2,499 Limit]

Request STL Exception: \$ _____ [\$4,999 Limit] Goods Only Goods/Services

Change the Monthly Credit Limit (CL) Current CL: \$ _____ New CL: \$ _____ [\$9,999 Limit] *

**If the CL change request exceeds \$10,000 please submit a written justification detailing the need for the increased limit along with this form.*

P-Card Role Addition/Change: Fill data in the appropriate column below.

Note: Will the individual currently listed remain in an active role to another card(s) Yes No

Current Department Head (DH)	Current Approving Official (AO)	Current Facilitator -1	Current Facilitator - 2
New Department Head	New Approving Official	New Facilitator - 1	New Facilitator - 2
New Department Head(Signature)	New Approving Official (Signature)	New Facilitator - 1(Signature)	New Facilitator - 2 (Signature)

Department Head Name: _____ Signature ²: _____

FOR OFFICIAL USE ONLY					
Training Completed:	Yes	No	Ethical Behavior Agreement Signed:	Yes	No
Approved By:	Title: Purchasing Card Administrator		Date:	Disapproved <input type="checkbox"/>	Reason:

Mail completed form to: UGA Procurement Office, P-Card Administrators, 424 E. Broad Street (OR) Fax to 706-542-7035 Attn: J. Haag/L. Stephens (OR) Email completed form to either jhaag@uga.edu or stephens@uga.edu

¹ If the Department Head or Approving Official is changing for multiple cards, only one form is needed. Please attach a list of all cardholders assigned to that DH or AO.

² Department Head signature may not be delegated