

# UAF PROCARD/TRAVEL CARD CHANGE FORM

 ProCard Change

 Individual Travel Card Change

 Dept. Travel Card Change

## CREDIT CARD INFORMATION (TYPE OR PRINT)

Cardholder Name (on existing card)

Card Number (Last 4 digits only)

Date Change Effective (mm/dd/yy)

## CARDHOLDER INFORMATION (ENTER ONLY THE FIELDS THAT NEED TO BE CHANGED)

Cardholder Full Legal Name

Work Phone

Department

E-Mail Address

Department Address (PO Box or Street)

City

State

Zip Code + 4

Reconciler's Name

Reconciler's E-mail

Reconciler's Phone No.

Approving Official's Name

Approving Official's E-mail

Approving Official's Phone No.

## DESIGNATED DEFAULT BANNER ACCOUNT & CONTROL INFORMATION

Fund

Org

Account

 Cycle Card Limit (ProCard & Dept.  
Travel \$10,000/ Ind. Travel \$5,000)

 Single Purchase Limit  
(\$2,500)

 Cash Advance  
(Default \$1,200/\$310)

 Authorizations/Day  
(Optional)

 Transactions/Month  
(Optional)

Justification for Limit(s) Over Default Limits:

Approving Official's Signature

Date

Fiscal Officer Signature (required for single purchase limit in excess of \$2,500)

Date

## TO BE COMPLETED BY PROCUREMENT AND CONTRACT SERVICES

Change made in PaymentNet 4

D Level Accounting Change Made

Date:

From FTIORGH

No:

Date:

By:

By: