

Visa Purchasing Card Maintenance Request Form

CARDHOLDER

Name (printed)	<input type="text"/>	Signature	<input type="text"/>
Dept / Bldg	<input type="text"/>	UCID #	<input type="text"/>
E-mail	<input type="text"/>	Date	<input type="text"/>
Telephone	<input type="text"/>	PCard number (last 4 digits)	<input type="text"/>

TYPE OF REQUEST - Select the appropriate action and provide a detailed explanation:

<input type="checkbox"/> Email Address Update (entered above)	<input type="checkbox"/> Cancel PCard (a)	<input type="checkbox"/> Suspend PCard (c)
<input type="checkbox"/> Phone Number Update (entered above)	<input type="checkbox"/> Cardholder Name Change (b)	
<input type="checkbox"/> Default Chartfield Change: <input type="text"/>	<input type="checkbox"/> Department Change (a,b)	

- a) The Cardholder is responsible to complete reconciliation for outstanding transactions or to assign a Reconciler to complete this task on their behalf.
- b) A new Purchasing Card Agreement must be completed and submitted under the new name/dept. (reference previous name on form).
- c) The Cardholder will be absent for 3+ months, and the card will be suspended (inactive) until their return.

Reconciler Add/Remove (UCID/Name)

Add:

Remove:

Limit Requests

	Converted to CAD \$	Explanation of Request:
Temporary limit increase (both single & monthly limit increases will automatically be updated)	<input type="text"/>	<input type="text"/>
Permanent single transaction limit increase	<input type="text"/>	
Permanent monthly limit increase	<input type="text"/>	

*** Quote or invoice copy to be submitted with form for temporary increases. Justification (explanation of request) required for permanent increase requests**

Note: Temporary transaction limits will be reset to permanent default limits at the end of the current billing cycle or once the transaction is completed

APPROVAL - Reports to Manager approval required for all changes with Department Budget Owner approval required only for Department or limit increases.

Note: Cardholders cannot approve their own request form.

Approver Name (printed)	<input type="text"/>	Dept. Approver (printed)	<input type="text"/>
Signature	<input type="text"/>	Signature	<input type="text"/>

Submit the completed and approved PCard Maintenance Request form to: cardhelp@ucalgary.ca

Corporate Card Program Approval: _____ Date: _____