|  |  |
| --- | --- |
|  | **PURCHASING CARD TEMPORARY LIMIT AMENDMENT FORM** |

|  |
| --- |
|  |
| **To:** | **Operational Lead**   |  **Date:** |        |
| **From:** |       | **Dept/School:** |        |
| **Subject:** | **P- CARD TEMPORARY LIMIT AMENDMENT** |

|  |
| --- |
|  |
| Please amend the temporary limit(s) of the P Card holder as follows:- |
|  |
| **First Name:**        | **Surname:**        |
| **Role:**      | **Emp ID:**       |
| **Delegated Financial Authority**  | $      |
| **Revised Monthly Limit:** $      |
| **Revised Transaction Limit** (if any)**:** $      |
| **Reason:** |  |
| **PCard Holder Signature** | **Name:** | **Signature:** | **Date:** |
| **Authorising Line Manager** | **Name:** | **Signature:** | **Date:** |
| **Authorised by****Unitec Operational Lead** | **Name:** | **Signature:** | **Date:** |
| Comments (if any): |  |  |  |
|  |
| **Please forward this completed and signed memo to the Finance Administration Manager, Bldg 110-2009**  |
|  |