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|  | **PURCHASING CARD LIMIT AMENDMENT FORM** |

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|  |
| **To:** | **Division Executive Director**   |  **Date:** |        |
| **From:** |       | **Dept/School:** |        |
| **Subject:** | **P- CARD LIMIT AMENDMENT** |

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| Please amend the limit of the staff’s P Card as follows:- |
| Permanent [ ]  | Temporary [ ]  to *Click here for date* |
|  |
| **First Name:**        | **Surname:**        |
| **Role:**      | **Emp ID:**       |
| **Delegated Financial Authority**  | $      |
| **Revised Monthly Limit:** $      |
| **Revised Transaction Limit** (if any)**:** $      |
| **Reason:** |  |
| **PCard Holder**  | **Name:** | **Signature:** | **Date:** |
| **Authorising Line Manager** | **Name:** | **Signature:** | **Date:** |
| **Unitec Head of Finance** | **Manasi Khatkul** | **Signature:** | **Date:** |
| **Authorised by****Executive Director** | **Name:** | **Signature:** | **Date:** |
| Comments (if any): |  |  |  |
|  |
| **Please forward this completed and fully signed memo to the Finance Administration Manager or the Assistant Accountant, Bldg 110-2009**  |
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