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| A logo on a white background  AI-generated content may be incorrect. | **PURCHASING CARD REPLACEMENT FORM** |

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| --- |
|  |
| **To:** | Division Executive Director |  **Date:** |  |
| **From:** |  |  **Dept/School:** |  |
| **Subject:** | P- CARD REplacEMENT |
|  |
| Please replace the Purchasing Card as card is:- |
|

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| --- |
|  |

Lost/Stolen:  |

|  |
| --- |
|  |

 Damaged: (Please remember to attach damaged card)  |
| Reason(s) for replacement : |
|  |
| **Surname:**  | **First Name:**  |
| **Employee ID:**  | **Email Address:**  |
| **Cardholder Signature:**  | **Mobile Number:** |
|  |  |
|

|  |
| --- |
| **PLEASE ATTACH DAMAGED CARD HERE** |

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|  |
| Please forward this completed and fully signed memo to the Finance Administration Manager or the Assistant Accountant, Bldg 110-2009 |
|  |
| **Authorising Line Manager:** | **Name:** | **Signature** | **Date:** |
| **Unitec Head of Finance:** | **Name:** | **Signature** | **Date:** |
| **Division Executive Director:** | **Name:** | **Signature** | **Date:** |