

Instructions – PCARD CHANGE FORM

This form must be used to communicate the following changes:

- Change in FRS account number
- Change of the cardholder's supervisor i.e. the previous supervisor has left the department and/or the University
- Change in the card contact for the Departmental/SPA card

Prior to processing, changes requested will be verified in both the FRS/DMAS and DHRS Systems i.e. account signers must be authorized and have a signature card on file and the DHRS system should reflect the cardholder' supervisor.

- Please note that a new application with the required approvals, must be submitted when a cardholder transfers to a new department
- Cardholders should notify the PCARD Office immediately if a card is no longer needed, if they are terminating from their department or from the University.

Please send forms to:

**Purchasing Card Office
Gables One Tower, Suite 750
Locator 2978
Fax 305-284-5835**

PURCHASING CARD – CHANGE FORM

To request changes for current/open/active PCARD accounts – complete as appropriate and submit to:
PCARD Office, Gables One Tower, Suite 750, Loc. 2978

Cardholder Name _____ UM ID # _____

Dept. Name _____

Card Type: _____ Individual _____ Departmental (SPA)

Last 4 digits of Account _____

Change of FRS Account Number - New Account _____

New Account Authorized Signer:

Name (print) _____ UM ID # _____

Signature _____

Supervisor Change

New Department Number (5 digits) _____ Sub Dept # _____

New Department Name _____

New Supervisor:

Printed Name _____ UM ID # _____

Signature _____

Change of Contact for Departmental Card (SPA)

New Contact Name _____

UM ID # _____ Email address _____

Phone _____ Fax _____

Signature _____

New Contact Supervisor:

Name _____ UM ID # _____

Supervisor's Signature _____