



### 1252.1.2F UNC-CH Purchasing Card Account Maintenance Form

For maintenance requests including **SECTION d**, send completed form to your **Access Request Coordinator (ARC)**.

For all other maintenance requests (a, b, c, e, & f), send completed form directly to [pcard@unc.edu](mailto:pcard@unc.edu).

Accountholder Name: \_\_\_\_\_ Date: \_\_\_\_\_

Department: \_\_\_\_\_ Last Four Digits of Credit Card #:

**Type of Request** (check all that apply)

**a. CANCEL CARD ACCOUNT** (a new Accountholder Agreement must be submitted to obtain a new card)

**b. CHANGE DEFAULT CHARTFIELD STRING** (confirm validity and budget of new CFS requested)

From: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Bus. Unit Fund Source Dept. Program CC 1 CC 2 CC 3

To: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Bus. Unit Fund Source Dept. Program CC 1 CC 2 CC 3

**c. CHANGE CREDIT LIMIT(S)**

Monthly Credit Limit (\$5,000, \$10,000, \$25,000, \$35,000, or \$50,000)      Single Transaction Limit (\$500, \$2,500, or \$5,000)

From: \$ \_\_\_\_\_ To: \$ \_\_\_\_\_      From: \$ \_\_\_\_\_ To: \$ \_\_\_\_\_

**d. UPDATE GROUP OFFICIALS** (if additional space is needed, submit attachment with required information)

Group Approver (new Group Approvers must complete required training)

Add Name: \_\_\_\_\_ ONYEN \_\_\_\_\_

Bus. Email: \_\_\_\_\_

Delete Name: \_\_\_\_\_

Group Proxy Reconciler (new Group Proxy Reconcilers must complete required training)

Add Name: \_\_\_\_\_ ONYEN \_\_\_\_\_

Bus. Email: \_\_\_\_\_

Delete Name: \_\_\_\_\_

Scoped Auditor

Add Name: \_\_\_\_\_ ONYEN \_\_\_\_\_

Bus. Email: \_\_\_\_\_

Delete Name: \_\_\_\_\_

**e. CHANGE CAMPUS MAILING ADDRESS**

From: \_\_\_\_\_ To: \_\_\_\_\_

**f. OTHER** (please specify): \_\_\_\_\_

Accountholder Signature \_\_\_\_\_

Bus Mgr./Dept. Head Signature \_\_\_\_\_