

Procurement Card Limit Change Request Form Complete and return to Procurement & Contracts Services (SH-125)

| Cardholder Name: | Coyote ID: |
|---|----------------------------|
| Cardholder Department: | _ Email: |
| Cardholder's Signature: | Date: |
| □ Limit Change: New Single Limit: \$ Ne | w Monthly Credit Limit: \$ |
| □ Temporary change to expire on// | □ Permanent Change |
| Primary Purpose for Procurement Card and Reason for the limit change: | |
| | |
| I hereby approve the above limit change and certify that the change is necessary to accomplish the mission and goals of the department. | |
| Primary Approving Official Signature: | Date: |
| Printed Name: | Title: |
| Dean's Signature: | Date: |
| Printed Name: | Title: |
| Division Vice President/Provost Signature: | Date: |
| Printed Name: | Title: |
| | |
| PURCHASING OFFICE USE ONLY - Completed by: | Date: |