Purchasing Card
THE UNIVERSITY OF UTAH

Purchasing Department

PCard Update Form – Add or Remove Reallocator

Contact Information for Requestor:

Name: _____
Department: _____
Phone: _____

Cardholder Information:

Name: _____
Department: _____
Phone: _____
Employee ID: _____
Last 10 Digits of Card: _____

Add a New Reallocator or Remove Existing Reallocator
(Please check one box)
☐ Add a New Reallocator *or* ☐ Remove Existing Reallocator
Name: _____
Employee ID: _____
Address: _____
Zip Code: _____
Phone: _____
Email: _____
This Reallocator has completed both Cardholder and Reallocator Training: ☐ Yes

This new reallocator will be: ☐ Primary Reallocator (Statement Recipient) *or* ☐ Alternate Reallocator

Name of Cardholder or Authorized Supervisor: _____
(Please Print)

**Approved By: _____ Date: _____
(Signed by Cardholder or Authorized Supervisor)

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