

PERMANENT INCREASE CHANGE REQUEST FOR P-CARD	
Cardholder Name:	Last 4 numbers of card:
Fiscal Officer/Account Manager:	Department:
Current Transaction Limit:	Permanent Transaction Limit Request:
Current Daily Limit:	Permanent Daily Limit Request:
Current Monthly Limit:	Permanent Monthly Limit Request:
What is the reason for the permanent increase?	
Additional Comments:	
Permanent Change Authorized By (Fiscal Officer):	Date:
For Internal Use Only	
Processed By:	Date: