

Appendix 4 Amendments to existing arrangement**Application to Amend Department/Authorising Manager**

Complete as required and forward to purchasecards@reading.ac.uk

1. Original details - to be completed in all cases

Cardholder name.....

Cardholder Department.....

Cardholder email.....

Authorising Manager Name

Authorising Manager Email.....

2. Cardholder Change of Department & Authorising Manager

New Cardholder Department.....

New Authorising Manager Name.....

New Authorising Manager email.....

I confirm that the above-named member of staff continues to require their University of Reading Purchasing Card in their new Department

New Head of School/Function:**Name (capitals)**.....**Signature**.....**3. Change of Authorising Manager only**

Please indicate the new Authorising Manager who will approve transactions each month.

New Authorising Manager name.....

New Authorising Manager email.....

4. Declarations - to be completed in all cases

- I confirm that I have read and accepted the Procedures Manual and understand I will be required to authorise transactions through the online system

New Authorising Manager signature.....

- I confirm that the Authorising Manager is senior to the cardholder in position or grade, within the University's normal financial delegations; and that statements will be reviewed each month to ensure that the expenditure incurred on the card is only for appropriate purchases

Head of School/Function:**Name (capitals)**.....**Signature**.....**Date**.....