

**DARTMOUTH COLLEGE
PROCUREMENT CARD DISTRIBUTION CHANGE REQUEST**

Name of Cardholder

Last 6 Digits of P-Card

Name of Person Requesting Change

Date

Reason for Change

Current Chart String					
Entity(2)	Org(3)	Funding(6)	Activity(6)	SubActivity(4)	Natural Class(4)
<input type="text"/>					

New Chart String					
Entity(2)	Org(3)	Funding(6)	Activity(6)	SubActivity(4)	Natural Class(4)
<input type="text"/>					

President, Vice President, Dean, Director, or Department Head Approval:

I hereby authorize the change in account string that has been requested.

Print Name:

Title:

Signature: _____

Date:

Current PTAE0 String				
Project(6)	Task(4)	Award(6)	Exp. Type(5)	Org(3)
<input type="text"/>				

New PTAE0 String				
Project(6)	Task(4)	Award(6)	Exp. Type(5)	Org(3)
<input type="text"/>				

Principal Investigator: (PTAE0 Accounts Only)

I hereby authorize the change for the new PTAE0 that has been requested.

Print Name

Title:

Signature: _____

Date: