

The University of Alabama in Huntsville

Approving Official Update Form

Department Name: _____

Date: _____

Submitted By: _____

Phone Number: _____

'LUHFWRU' HDQ 'HSDG:WPHQW _____

Signature: _____

Date: _____

New Approving Official Name: _____

Email: _____

Phone: _____

By signing I certify that I will abide by all Procurement Card policies and failure to adhere may result in suspension or revocation of the departmental privileges.

Signature: _____

Date: _____

Cardholders Under New Approving Official

Cardholder Name

Procurement & D Services Official: _____

Date: _____