

CAL POLY POMONA
PROCUREMENT CREDIT CARD PROGRAM

APPROVING OFFICIAL CHANGE FORM

DATE:

TO: Procurement and Support Services, Bldg. 75
Attention, Lou Yang

FROM:

SUBJECT: Change in Approving Official in Department

Please change the Approving Official for the following credit cardholders effective

Date

Cardholder's Name

Cardholder's Name

Cardholder's Name

Cardholder's Name

Department Chartfield String:					
	Account (6 digits)	Fund (5 digits)	Dept ID (5 digits)	Program (4 digits)	Class (5 digits)

New Approving Official:

Print or Type Name

Signature

Title

Date

Department Participation Approval:

Department Head/Dean: _____
Print or Type Name Date

Signature: _____
Title