|  |  |
| --- | --- |
|  | State Purchase Card Entity Change |

**4.2 P-Card Program Maintenance**

Any changes to the State Entity Purchase Card (P-Card) Administrator or Back-Up P-Card Administrator shall be submitted to the State Purchase Card Administrator in writing utilizing this form and signed by the State Entity's Chief Administrative Officer. The form may be mailed, emailed, or scanned and emailed to the State Purchase Card Administrator. It is required to list the outgoing and incoming person’s information, such as, name, email address, phone number, etc... The State Purchase Card Administrator will forward the changes to the Issuing Bank.

The most recent version of the State of Oklahoma purchase card procedures is available at the following: <http://www.ok.gov/DCS/documents/PurchaseCardProcedures.pdf>

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **P-Card Role Change (check all that apply):** | | | | | | | |
|  | Agency P-Card Administrator | | |  | Agency P-Card Administrator Back Up | | |
| Agency Name: | |  | Agency Number: | | |  |

**Incoming Information/Effective Date**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| First Name |  | | Last Name |  | | |  |  |  |  | |
| Phone Number | | (   )     - | | | Fax Number | (   )     - | | | | |
| E-Mail Address | |  | | | | | | | | |

**Outgoing Information:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| First Name | | | |  | | | | | Last Name | | |  | | | | |  |  |  |  | | | | |
| Phone Number | | | | | (   )     - | | | | | | | | | Fax Number | | (   )     - | | | | | | | |
| E-Mail Address | | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | | | | |
| State Entity Chief Administrative Officer Signature | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | |  | | | | | | | | | | | |
| Date | | | | |  | | | Printed Name | | | | | | | | | | | |
|  | |  | | |  | |  | | |  | | | | | | | | | | | | |
| *Please submit this form to:* [*PCard@OMES.ok.gov*](mailto:PCard@OMES.ok.gov) | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | | | | | | | | | | |
| Purchase Card Administration | | | | | | | | | | | | Phone: | | (405) 522-1654/(405) 522-4812 | | | | | | | | |
| 5005 N. Lincoln Blvd., Ste. 100 | | | | | | | | | | | | Email: | | pcard@omes.ok.gov | | | | | | | | |
| Oklahoma City, OK 73105 | | | | | | | | | | | |  | |  | | | | | | | | |