

Agency/Division Emergency Purchasing Card Limit Request

Agency			
leed for/Justification	of Amount Requested Limit Requ	ested	
01. Signer, by signature	er Certification ssion of a State of Arizona Purchasing Card (P-Card) and must have exe e, acknowledges and agrees that the authorization of a given P-Card limi s and increase in spending authority.		
Employee Signature			
Employee Name		EIN	
itle		Date	
gency Head Certificat	tion		
	ure, acknowledges and agrees that the authorization of a given P-Card lines an increase in spending authority.	nit does	s not constitute
nder any circumstances	s an increase in spending authority.	nit does	s not constitute
nder any circumstances Agency Head Signature	s an increase in spending authority.	nit does	s not constitute
nder any circumstances Agency Head Signature Agency Head Name	s an increase in spending authority.	1	s not constitute
nder any circumstances Agency Head Signature Agency Head Name Fitle or General Accounting	g Office (GAO) Use Only	EIN Date	s not constitute
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nder any circumstances Agency Head Signature Agency Head Name Fitle or General Accounting	g Office (GAO) Use Only	EIN Date	s not constitute
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nder any circumstances Agency Head Signature Agency Head Name Fitle or General Accounting	g Office (GAO) Use Only	EIN Date	s not constitute
agency Head Signature Agency Head Name Title Or General Accounting Reason for Difference	g Office (GAO) Use Only	EIN Date	s not constitute
nder any circumstances Agency Head Signature Agency Head Name Title Tor General Accounting	g Office (GAO) Use Only	EIN Date	s not constitute

GAO – COOP – 101 (05/2025) Page 1 of 1