CREDIT CARD EXCEPTION REQUEST

Procurement Services Division

All exception requests are subject to approval by the Credit Card Program. If approval is granted, the requesting site agrees to provide receipts and account statements upon request.

Request Date		School/Office							Location	Location Code					
Mark the office with administrative oversight:															
Office- Non-school		Region	Region North Region South I						Regio	n West					
Cardholder First Name					rdholder ast Name					Er	Employee ID				
Cardholder Phone #				Ca	ardholder E-mail						Approving icial Name				
Type of Request:						Prohibited uses:									
CYCLE LIMIT INCREASE SINGLE PURCHASE INCREASE						This exception does not include the purchase of items for personal use.									
MCC FORCED AUTHORIZATION OTHER:						Failure to comply may result in cancellation of the card, personal liability and/or disciplinary action.									
Card Type: □ P-Card Tra Please provide a detailed explanation for the requested ex							d (T-Ca			•	Other				
Funding Source (to be used for this purchase):				Fund:			Functional Area:				Cost Center:			:	
Cardholder Signature											Date				
Approving Official or Site Admin. Name						Phon	Phone #		Of			oproving fficial or Site dmin Employee ID			
Approving Official or Site Admin. Signature											Date				
	Procurement Services Division Use Only														
					Do not	write be	elow this	line							
ApproveDisapprove			Comme	omments:			Action Taken					Exp Dat			
Credit Card Pr	er								D	ate					