FLORIDA POLYTECHNIC UNIVERSITY PROCUREMENT DEPARTMENT

PCard Exception Request Form

Supplier Name	<u>Amount</u>	Department Name	Expense Card Holder	Monthly or one-time
PURPOSE OF EX	PENSE:			
JUSTIFICATION:	(Provide benefit	to the university AND just	ification if circumventing rou	tine purchasing procedures)
Benefit to Unive	ersity:			
December sires representing the resulting purchasing proceedures.				
Reason for circumventing the routine purchasing procedures:				
Cost Center: Fund:				
	e of purchase:			
·				
Cardholder Signat	ture		Date	
Cost Center Mana	ager or Supervisor	Signature	 Date	
if CCM is the same	- '	U	Date	
			 Date	
Procurement Sign	ature		Date	

Please note: Exceptions are not approved until the form has been reviewed and approved by the appropriate Procurement Official.