## **S**H

Sam Houston State University A Member of The Texas State University System Procurement and Business Services

## **P-Card Exception Approval Form**

Department Name:		_
Last 4 Digits of Card #:		_
Transaction Date:		_
Transaction Amount:		_
Exception Requested by:	(Delegate's Name)	_
Department Head Approval:	Signature	_
P-Card Administrator Approval:	Signature	

Provide in detail an explanation of the exception requested associated with this P-Card purchase:

Delegate's Signature

Instructions:

This form should be completed for any p-card exceptions. Add additional pages if needed and attach. This form and all documentation should be faxed or emailed to the P-Card Administrator for approval <u>before the transaction is made</u>.