



State of Louisiana  
Office of State Procurement  
And Travel

ATTACHMENT F

REQUEST FOR EXCEPTION TO  
STATE P-CARD AND  
CBA POLICY/PROCEDURES

Mail To: State Travel Office  
Post Office Box 94095  
Baton Rouge, LA 70804-9095  
Attn: Brenda Myers

OR

Fax To: 225-342-5019  
Attn: Brenda Myers

Agency/College/University Official Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Agency Program Administrator: \_\_\_\_\_

Describe Exception Request for Approval and Justification for Need: (If necessary attach additional page)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cite specific paragraph(s) of State P-Card/CBA Procedure and/or Guideline related to the exception:

Please specify the time period for which you are requesting the exception.

\_\_\_\_ One-time override (List MCC Code, if applicable, Override in Exception Above)

\_\_\_\_ Permanently

\_\_\_\_ From \_\_\_\_\_ 20\_\_ to \_\_\_\_\_ 20\_\_

The undersigned, duly authorized to sign on behalf of the state entity named herein, for the purpose of requesting an exception to the State Travel P-Card/Card/CBA procedures, does hereby affirm that the requested exception is necessary. **Further, in the event this exception is approved, I understand it does not relieve said state entity of its legal responsibilities to ensure that all issues associated with this request will be in compliance with all applicable purchasing rules, regulations, PPM49, statues and executive orders.**

\_\_\_\_\_  
Signature of Program Administrator

\_\_\_\_\_  
Date

This request is hereby: \_\_\_\_ Approved \_\_\_\_ Denied

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
State Purchasing & Travel

\_\_\_\_\_  
Date