Accounts Payable Exception Request

SDSU | San Diego State University

Purchaser's Name: _____

Purchaser's Signature: _____ Date: _____

Policy Exception(s) *Select up to 3 from drop downs*	

Reason for Exception Request - Please explain *why* the policy exception(s) occurred:

I approve the exception(s) to San Diego State University's policy as documented above:

_____   _____   _____

Print Name   Signature   Date
(Associate Vice President or Dean)