



Office of the University Controller  
 Florida State University

Payables and Disbursements  
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**P-Card Fax Exempt Form**

All departments that currently have Purchasing Card cardholders are responsible for submitting the Monthly Reconciliation Packet for each cardholder via fax to the Accounts Payable P-Card imaging system at 645-7211. The Packet should include the Monthly Reconciliation Form and the accompanied Receipts/Invoices.

Although there is no exemption for faxing the Reconciliation Form, certain departments may be exempt from having to submit their cardholders P-Card Receipts/Invoices for one fiscal year depending on (1) the total number of cardholders they currently have and/or (2) the amount of transactions they process per month.

Please fill out the information below, if your Department should be considered for exemption in faxing the departments Receipts/Invoices for fiscal year: \_\_\_\_\_

NOTE: All departments, including those exempt from faxing the Receipts/Invoices, are still responsible for (1) faxing the completed Reconciliation Forms, including months with No Charges, and (2) maintaining documentation as stated in the manual, in addition to being subject to in-house reviews.

**Department**

Dept Name \_\_\_\_\_ Dept ID \_\_\_\_\_

| Cardholder's Information |                    |                               |
|--------------------------|--------------------|-------------------------------|
| Cardholders Name         | ID (last 5 digits) | Approx. # of trans per month* |
| 1                        |                    |                               |
| 2                        |                    |                               |
| 3                        |                    |                               |
| 4                        |                    |                               |
| 5                        |                    |                               |
| 6                        |                    |                               |
| 7                        |                    |                               |
| 8                        |                    |                               |
| 9                        |                    |                               |
| 10                       |                    |                               |
| 11                       |                    |                               |
| 12                       |                    |                               |

\*To find the approximate number of transactions per month, please use the FSU\_DPT\_PCARD\_TRANS\_INFO query in OMNI.

Any other reasons for exemption:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This form was filled out by: \_\_\_\_\_ (Proxy Name) \_\_\_\_\_ (Proxy Email)