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**DATE:** \_\_\_\_\_

**FROM:** Responsible User \_\_\_\_\_ Employee ID Number \_\_\_\_\_

Responsible Cardholder (if different than user): \_\_\_\_\_

PCard Liaison: \_\_\_\_\_

Business Manager or Equivalent: \_\_\_\_\_

Department Head/Director: \_\_\_\_\_

**TO:** Financial Compliance

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**DEPARTMENT NAME:** \_\_\_\_\_

**DEPARTMENT NAME:** \_\_\_\_\_

Name on Card (exactly as it appears): \_\_\_\_\_ Last 4 Digits: \_\_\_\_\_

**RE:** Post Date \_\_\_\_\_  
eDoc # \_\_\_\_\_  
Merchant \_\_\_\_\_  
Amount \_\_\_\_\_

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**THE FOLLOWING POLICY WAS VIOLATED (PLEASE CHECK ONE):**

- University Policy: Unallowable Expenditure: Personal Purchases, Alcohol, PCard
- Policy: Restricted Expenditure, pyramiding, Single Transaction Limit
- Other (specify policy): \_\_\_\_\_

Summary Explanation: (Please attach additional page if the space provided is insufficient)

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## REQUIRED SIGNATURES

By signing and submitting this letter we acknowledge that a violation of PCard policy has occurred and that the appropriate University/PCard policies will be adhered to in the future. We also acknowledge:

- All relevant PCard documentation for this transaction, including copies of itemized receipts, is attached to this form.
- For a violation that requires reimbursement to the University, the reimbursement was processed on edoc \_\_\_\_\_. **Or**
- The employee agrees to a payroll deduction of \_\_\_\_\_

**Note:** If reimbursement to the University was not completed at the time the self-report violation form is sent to Financial Compliance, a payroll deduction will automatically be processed

- Depending on the severity and number of violations, Financial Compliance reserves the option to: 1) Suspend the card, 2) Cancel the card, 3) Suspend the Department's PCard program.

### RESPONSIBLE USER:

\_\_\_\_\_  
Name Signature Date

### RESPONSIBLE CARDHOLDER (IF DIFFERENT FROM USER):

\_\_\_\_\_  
Name Signature Date

### PCARD LIAISON:

\_\_\_\_\_  
Name Signature Date

### BUSINESS MANAGER OR EQUIVALENT:

\_\_\_\_\_  
Name Signature Date

### DEPARTMENT HEAD/DIRECTOR:

\_\_\_\_\_  
Name Signature Date

Attach a copy to the eDoc in UAccess Financials under Notes and Attachments and AddHoc to group 1062191 FNSV AP Financial Compliance. Step by step instructions are available on the [Self-Reporting Violations web page](#).