



Procurement Services
 Transgression Notice – Payment approval request
 Act of performing a transaction that contravenes the Policy/Method

Your reference # (if any)	
Faculty – Service	
Chief Administrative Officer	
Financial Officer	
Requestor	
Company Name	
Transgression Date (invoice)	
Transgression Amount to be approved	
Funds	<input type="checkbox"/> Operation <input type="checkbox"/> Research <input type="checkbox"/> Facilities
Type of commodity	<input type="checkbox"/> Service <input type="checkbox"/> Good
History	
Explanations – reasons	
Actions Taken to avoid such a situation reoccurs	

Please provide all supporting documents

Procurement Services Internal Section

Additional information and comments:	
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Name:

Title:

Signature: _____

Date: _____

I approve the request for payment mentioned above.