

**UNIVERSITY OF CALIFORNIA, RIVERSIDE**  
**PROCUREMENT CARD PROGRAM**  
**EXHIBIT 4-VIOLATION FORM**

This form is required for any Procurement Cards transaction where a violation has occurred.  
Note: Violations could result in revocation up to and including dismissal and criminal prosecution

**INFORMATION**

Cardholder Name: \_\_\_\_\_ Department Name: \_\_\_\_\_  
Cardholder's DCA's Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
Transaction ID #: \_\_\_\_\_ Transaction Date: \_\_\_\_\_  
Merchant Name: \_\_\_\_\_ Transaction Amount: \$ \_\_\_\_\_

**TYPE OF VIOLATION**

The following Procurement Card violation has been found in reference to the above transaction.

DCA/FO's Instructions– obtain information from the Cardholder about why this purchase was made on his/her Procurement Card. Mark the appropriate category below. See Procurement Card Guidebook for details on recognizing a violation.

- \_\_\_\_\_ **PERSONAL PURCHASE**
- \_\_\_\_\_ **CASH OR CASH TYPE TRANSACTION**
- \_\_\_\_\_ **SPLIT PURCHASE**
- \_\_\_\_\_ **INAPPROPRIATE PURCHASE:**
  - \_\_\_\_\_ **Contract requiring authorized signature**
  - \_\_\_\_\_ **Equipment Purchase**
  - \_\_\_\_\_ **Furniture**
  - \_\_\_\_\_ **Entertainment**
  - \_\_\_\_\_ **Travel & Travel related expenses**
  - \_\_\_\_\_ **Other** \_\_\_\_\_
- \_\_\_\_\_ **FAILURE TO PROVIDE ORIGINAL DOCUMENTATION WITHIN 10 DAYS FROM PURCHASE DATE**
- \_\_\_\_\_ **SHARING CARD OR AUTHORIZING OTHERS TO USE CARD**
- \_\_\_\_\_ **OTHER (Specify):** \_\_\_\_\_

**CARDHOLDER EXPLANATION** – Explain why this purchase was made on a University credit card and information on what has been done to correct the situation. Attach an additional sheet if necessary. \_\_\_\_\_  
\_\_\_\_\_

**PURCHASING, AUDIT AND ADVISORY SERVICES AND/OR FINANCIAL OFFICER DETERMINATION, CERTIFICATION SIGNATURE, ACTION** - Mark appropriate category and take the actions listed.

\_\_\_\_\_ I hereby acknowledge that the above transaction is a violation of the Procurement Card policies and I further acknowledge that the Cardholder has been warned through the use of this form. Actions – 1) obtain the Cardholder's signature on this form, 2) send the original of this completed form, along with the documentation for the above transaction to the Purchasing Department, attn: PCC 3) keep a copy of this completed form with the Cardholder's Statement and/or in a separate "violations file" in the department, 4) give a copy of this form to the Cardholder.

\_\_\_\_\_ I hereby acknowledge that the above transaction is a violation of the Procurement Card policies and I further acknowledge that the Cardholder may not use their card until they have received additional Procurement Card training.

\_\_\_\_\_ I hereby acknowledge that the above transaction is in violation of Procurement Card policies and believe that the Card should be revoked at this time. Actions 1) Notify the PCC in Purchasing at 909-787-3008.

\_\_\_\_\_ Other (Specify): \_\_\_\_\_

Approving Official Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**CARDHOLDER CERTIFICATION SIGNATURE**- I hereby acknowledge that the above transaction is in violation of Procurement Card policies. I further acknowledge that repeated violations could result in revocation of my Procurement Card. I further acknowledge that I have been warned through the use of this form. I understand that I am permitted to make purchases that are in compliance with Procurement Card policies and agree to refer to my Procurement Card Guide or contact my Department DCA or FO or the Procurement Card Administrator if I am unsure about Procurement Card policies or instructions.

Cardholder Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_