

July 26, 2010

PCard-08-2010: Cardholder and AO Certification of Training Completion on Purchase Card Requests

This information is being sent on behalf of John T. McCain, Program Manager, Charge Card Service Center Program Office.

As communicated in the '**PCard-31-2009: New Charge Card Workflow and Card Issuance Process based on A-123 Mitigation Measures**' notice sent on September 30, 2009, the CCSC team assumed the responsibility of new card setup and new hierarchy request from the agencies. New card requests and hierarchy set-ups forms are to be completed and emailed to the ccsc@dm.usda.gov for processing and submission to US Bank.

This communication serves as a follow-up to inform you of a change to the 'Cardholder Request for Purchase Card' form. Effective immediately, when completing the new card request form, the cardholder and his/her AO will be required to sign the Cardholder Request for Purchase Card form acknowledging that he/she has completed the training, understands the regulations, and knows the consequences of inappropriate actions. A copy of the Access Online training certificate (only) should be attached for both the cardholder and the AO, and you will need to check either the "Yes" or "No" boxes to confirm whether or not the cardholder has a dual role as LAPC and/or as AO.

Please find the attached updated Cardholder Request for Purchase Card form, which includes the above requirements. Please inform your Coordinators, AOs and cardholders of the new change. The CCSC will continue to accept Purchase card requests in the old form until Friday, August 13, 2010. **As of Monday, August 16, 2010, any Purchase card request submitted to the CCSC in the old form will be rejected.**

Refresher on the Purchase Card Request Process (Effective October 1, 2009)

1. The AO completes the attached 'Cardholder Request for Purchase Card' template and submits it to the account Coordinator (LAPC or APC). Please ensure the following:
 - a. The name entered in the 'Name' field **matches** the applicant's name on record with the USDA's HR department.
 - b. The "Line of Accounting" is **correct** on the request submitted so that the request is not rejected. To ensure accuracy, please copy the line of accounting (directly from AXOL) and paste the value into the 'Accounting Segments' field of the Cardholder Request for Purchase Card template.
 - c. The hierarchy is **valid**. Also, please make sure that the processing and reporting hierarchies (i.e., agent/level4; company/level 5; division/level 6; department/level 7) **match**.
 - d. The 'Third Line Embossing' field is completed with the information you want embossed on the card below the cardholder's name
 - e. The form is **signed by both** the Cardholder and the Approving Official before submitting to the CCSC
 - f. The demographic information (i.e., including zip code) is **valid**, as well as the telephone number and email address **are** included.
2. When entering the Monthly Office Limit (i.e., 30-Day), Single Purchase Limit, and Convenience Check (Y/N), please ensure compliance with the Purchase limit policies
3. The Coordinator (LAPC or APC) will review the request and email the completed request to ccsc@dm.usda.gov with cc: to yadira.stamp@dm.usda.gov
 - a. Enter "New Purchase Card Request" and the Agency (e.g. ARS) in the subject line of the email
4. The CCSC will perform a Quality Assurance (QA) validation on the agency submitted request and if errors are found, will return to the submitting agency Coordinator for necessary changes and re-submission.
5. Upon completion of a successful request validation review, the CCSC will email a confirmation of receipt to the submitting agency Coordinator with cc: to the agency AO. The submitting Coordinator must reply to this confirmation email to confirm and validate the request for the new card account request.
6. The CCSC will submit the validated request for new card account to US Bank for processing and card issuance.

CARDHOLDER REQUEST FOR PURCHASE CARD

Cardholder Information:

**All fields are required information*

Name: _____

(Name listed above must match the applicant's name on record with the USDA's HR Department)

Agency/Division/Office: _____

(21 characters max)

Third Line Embossing: _____

(The first 8 characters will be embossed on the card)

Address 1: _____

(36 characters max)

Address 2: _____

(35 characters max)

City: _____ State: _____ Zipcode: _____

Telephone No.: _____ E-mail Address: _____

Single Purchase Limit: _____ Monthly Office Limit: _____

Accounting Segments: _____
(Copy & Paste the Line of Accounting directly from Access Online)

***BOC: 2670**

Are Convenience Checks necessary: () Yes () No APC/LAPC: () Yes () No AO: () Yes () No

Copy of AXOL Training Certificate attached: () Yes () No

I certify that I have completed all required training, understand the regulations and procedures, and know the consequences of inappropriate actions.

Signature of Cardholder

Date

Approving Official Information:

Name: _____

Agency/Division/Office: _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone No.: _____ E-mail Address: _____

Copy of AXOL Training Certificate attached: () Yes () No

I certify that I have completed all required training, understand the regulations and procedures, and know the consequences of inappropriate actions.

Signature of Approving Official

Date

For LAPC/APC use only:

Agent _____ Company _____ Division _____ Department _____

Level1: _____ Level2: _____ Level3: _____ Level4: _____ Level5: _____ Level6: _____ Level7: _____

Rec'd Date: _____ Reject Date: _____

Reject Reason: () Incomplete (missing information) () Other _____