Office of Procurement & Property Management (OPPM)
Charge Card Service Center (CCSC)

APC Annual Purchase Card Program Review

Summary of Findings			
Agency:		**Period Covered:**	
APC Name:			
Total # of Cardholders for the Agency:		**Total # of AOs for the Agency:**	
Total # of LAPCs:			

#	Data Requested	Number
1.	Total No. of cases reported to OIG/APC for possible card misuse and/or abuse.	
2.	Total No. of administrative and/or disciplinary actions taken for card misuse.	
3.	Total No. of administrative and/or disciplinary actions taken for convenience check misuse.	

Please indicate in the table below whether all LAPCs submitted their quarterly reports and if they were compliant.

#	Specific Review Criteria	Yes/No	Comments
	LAPC Quarterly Reports		
1.	1st Quarterly Review Submitted (October-December due February 28)		
2.	2nd Quarterly Review Submitted (January-March due May 31)		
3.	3rd Quarterly Review Submitted (April-June due August 30)		
4.	4th Quarterly Review Submitted (July-September due November 29)		

Additional Findings, Comments, or Recommendations (Optional)

With my signature below, I affirm that all information provided on this form is true and accurate.

APC Signature

Date