



# Procurement Card Training



## Office of the Comptroller



# Agenda

- What is the Procurement or “P-Card”?
- Using **WORKS™**
- Security of the Card
- Department Responsibilities
- Cardholder Responsibilities
- Card Restrictions
- Statement Verification
- Payment Processing
- Forms and Policies
- Reports and Notifications





# What is the Procurement Or “P-Card”?

- In conjunction with Bank of America™, the P-Card is a payment method choice that has the ability to integrate into MMARS
- Provides all the features of a Credit Card plus:
  - Offers enhanced functionality
  - Superior security controls
  - Faster turn around
- A P-Card is an alternative payment device for incorporated entities. What you can do with a GAX and/or INP you can do with a P-Card.
  - With the exception of legal and medical (medical allowed with approval) services and non-incorporated entities
- The Financial Reform Act allows merchants to set a minimum of \$10 to accept a card for payment
  - In the past it was against Visa and MasterCard rules for merchants to require a minimum amount to accept card—the reform bill has changed this. Merchants now have the right to deny purchases via credit card if the purchase amount is less than \$10.00.



# What is the Procurement Or “P-Card”?

- Card is **Tax Exempt** (Mass Sales Tax, Meals Tax)
- Not Gas Tax Exempt
- **Tax exempt ID** is on the credit card to show to vendor

For example: MA TAX EXMPT ID 046002284



# What is the Procurement Or “P-Card”?

- The Commonwealth Credit Card, the P-Card, is an alternate payment method
- Supports P-Card profiles that can be developed to meet departmental business needs

## Examples:

- Profiles can be restricted to certain one or more merchant category codes (over 800 MCC's). Making this different than a credit card
- For infrequent travelers cards can be issued for zero dollars, and then have the limits adjusted to fund the duration of the trip
- In certain cases a card can be designated to be used with a particular vendor only



# What is the Procurement Or “P-Card”?

- Department setup takes up to 2 days
- Individual cards take up to 4 days
- In an Emergency, cards can be created by the next business day
- New Card Requests:
  - Will be processed by CTR Payee/Payments Staff
  - Procurement Card request form
  - Employee Procurement Card Agreement
  - CFOs may send the Procurement Card request form to:  
[Thomas.Smith-Vaughan@state.ma.us](mailto:Thomas.Smith-Vaughan@state.ma.us), [Kim.Doan@state.ma.us](mailto:Kim.Doan@state.ma.us) and  
[John.Newell@state.ma.us](mailto:John.Newell@state.ma.us)



- Every cardholder must have a **WORKS™** account login
- Every administrator (CFO/Auditor) must have a **WORKS™** account login
- **WORKS™** is set up and administered by CTR

The screenshot displays the 'Works Payment Manager' interface. At the top, there is a navigation bar with 'Home' and 'Logout' options. A sidebar on the left contains menu items: Tasks, Reports, Tools, Personal Settings, User Information, Email Preferences, Alerts & Notices, Search, and Reference. The main content area features a table with the following data:

Action Required	Count	Type	Acting As	Current State
Sign Off	25	Transaction	Cardholder	Pending

Below this table is a section for 'Cards' with a 'Primary Access' dropdown. A table lists card details:

Card Name	Card ID	Avail. Funds	Credit Lim.	Avail. Credit	Trans. Lim.	Emboss	Profile	Buff
COLLEGE STORE	7137	\$239,413.26	\$250,000.00	\$238,527.59	N/A	COLLEGE STORE	\$250000 CL / - STL / - DTC	0%

At the bottom of the interface, there is a pagination bar showing 'Viewing 1-1 of 1 items', 'Show 100 per page', and 'Page 1 of 1'. A 'Message:' field is located at the very bottom.



- In **WORKS™** Cardholders and Auditors will run monthly reports
  - Reports are available for Cardholders and Auditors
  - A **WORKS™** User Guide including report running instructions will be distributed to users
- In **WORKS™** we have the basic six MCC classes
  - The cash MCC is excluded by both policy and **WORKS™**
  - The five remaining basic MCC classes are divided into over 800 MCCs sub-codes



# Security

- All users must guard their credit card account numbers

- **Lost and stolen cards**

- Cardholder **must immediately** notify both:
  - Bank of America **1-888-449-2273**
    - This line is available 24 hours a day, and cardholders must advise BOA reps that the call is regarding a lost or stolen card.
  - CFO
- The CFO then notifies the Office of the Comptroller

- Thefts and misuse must also be reported to:
  - Office of the Comptroller
  - State Auditor's Office





# Department Responsibilities

- Stay current with the policy and procedure
- Department Head must sign off
- Pay the entire bill on time
- Responsible to pay the bill in full
- No credit checks against individual card holders
- Training of new cardholders
  - CFO has to be present at the training
    - Not required that the CFO conducts the training
  - All Cardholders must sign Commonwealth Procurement Card Employee Agreement form before they are given a P-Card





# Department Responsibilities

- **Must** indicate in the internal controls that the P-Card is being used as a payment mechanism
- **Must** in the Commonwealth Procurement Card Policy and Procedures add addendum to your policies and procedures
  - You may create your own policy and procedures or amend the Commonwealth Policy and Procedures but in either case they must be more restrictive rather than less restrictive than the Commonwealth's
- **Must** require Cardholders to do Receipts Management for expeditious reconciliation
  - You only have twenty-five days from when you receive the bill until the payment **must** be in the bank's hands
- **Must** encumber



# CFO/Department Responsibilities

## CFOs:

- Request new cards
- Decrease credit limits
- Increase credit limits
- Cancel cards
- Train
- Collects the Commonwealth of Massachusetts Employee Procurement Card Agreement form
- Manage the program
- Should assign another user as Auditor to view everyone's charges
  - Billing staff require authorization in an email from CFO to access **WORKS™**





# Department Responsibilities

- Work with CTR on any disputes
- To enter the P-card program, Department Heads must sign off the BofA new Department setup form then mail to CTR
  - Wet signatures **only**
- Card Restrictions:
  - **NO Cash**
  - **NO ATMs**
  - **NO Checks**
  - **NO Over the Counter Cash**
  - **NO Gift Cards**
  - **NO Personal use**
  - **NO Alcohol**
  - **No Legal Services and Attorneys**
  - **Non-Incorporated entities**

A large, bold, red 3D-style word "NO" with a reflection underneath, set against a white background.



# Cardholder Responsibilities

- Cardholder **must** have signature authority for financial or above
  - If user has no MMARS access, then use “Credit Card” signature authority
- Cardholder **must** not share the card
- Cardholder **must** report lost or stolen cards to the bank and their CFO immediately
- Cardholder **must** sign the Commonwealth Procurement Card Employee Agreement form



# Cardholder Responsibilities

- Card is in the cardholders name but there is not a credit check against the card holder
  - The credit check is against the Commonwealth
- Cardholders **must** give receipt to management
- Disputes: The cardholder only works with the vendor and the bank





# Statement Verification

## Three Ways for Departments to verify statements:

### 1. Monthly Email Notification

- From John Newell of CTR at the end of the cycle
- Use "*Ending Balance*" amount to make payment

### 2. Use **WORKS Online Website** to get the "**Spend Report**"

- Only shows Details spending transactions

### 3. **Monthly Paper Statement** from Bank of America

- Mailed to departments at the ending of the cycle
- Shows Summary amounts and Details spending
- Use "*Total Payment Due*" same as "*Ending Balance*" to make payment



# Payment Processing

- Payment cycle is 25 days end to end
- Encumbrance document is required
- Billing usually ends on the 27<sup>th</sup> of the month
  - If the 27<sup>th</sup> falls on the weekend, the billing end date is on the 25<sup>th</sup> or 26<sup>th</sup>
- Use vendor code **VC0000138161**
- Payment should be available in MMARS 5 days before Due date
- Mark the payment Single
- Never pull a check. Default to EFT
- Vendor Invoice Number is the 16 digits CORPORATE number plus MONTH/YEAR. This will make each payment unique
- Use INP/GAX documents





# Payment Processing

## E30 - CREDIT CARD PURCHASES

- For payments to the approved Commonwealth credit card contractor for “petty cash” and “incidental purchase” items authorized to be purchased using a Commonwealth credit card issued to eligible departments in accordance with the credit card policy issued by CTR and OSD
- Items purchased may be those authorized by the Department Head for Commonwealth business only
- For non-credit card purchases, see appropriate object class(es)
- Use **GAE** Document (all object codes can be used)



# Payment Processing

## E31 - CREDIT CARD PURCHASES FINANCE CHARGES

- For finance charges associated with the use of approved Commonwealth credit card contractor payments only
- Use **GAE** Document





# Forms and Policies

Available on Comptroller's Internet under Publications and Reports tab

Mass.gov State Offices & Courts | State A-Z Topics | State Forms | No Active Alerts | Skip to content

The Official Website of the Comptroller of the Commonwealth (CTR)

**Comptroller**  
**Thomas G. Shack III**

Search...

Publications and Reports | **Guidance for Vendors** | Guidance for Agencies

Home > Publications and Reports > Forms > Payments

### Payments

Payments Forms	Posted Date
<a href="#">Electronic Funds Transfer (EFT) Web Form</a>	11/18/2009
<a href="#">Employee Reimbursement Form</a>	1/5/2009
<a href="#">Prior Year Deficiency Appropriation Management</a>	4/17/2012
<a href="#">Procedures for Payroll Deficiencies</a>	4/17/2012
<a href="#">Procurement Cardholder Setup Form</a>	10/29/2008
<a href="#">Procurement Card Company Setup Form</a> PDF Format	10/29/2008
<a href="#">Procurement Card Use Employee Agreement</a>	10/29/2008
<a href="#">Prompt Pay Discount Form</a>	3/14/2007
<a href="#">Settlement and Release Form</a>	2/22/2005
<a href="#">W9 Form</a>	4/9/2009

Mass.gov State Offices & Courts | State A-Z Topics | State Forms | No Active Alerts | Skip to content

The Official Website of the Comptroller of the Commonwealth (CTR)

**Comptroller**  
**Thomas G. Shack III**

Search...

Publications and Reports | **Guidance for Vendors** | Guidance for Agencies

Home > Publications and Reports > Policies > Payments and Payee

### Payments and Payee

Payments and Payee Policies	Posted Date
<a href="#">Advance Management</a>	11/1/2006
<a href="#">Bill Payment Policy</a>	5/20/2011
<a href="#">Commonwealth Procurement Card Program</a>	10/29/2008
<a href="#">Expenditure Corrections (EX)</a>	11/1/2006
<a href="#">Expenditure Refunds (ER)</a>	3/8/2010
<a href="#">Liability Management and Reduction Fund - Tort Claim Policy</a>	11/1/2006
<a href="#">Prompt Payment Discounts</a>	5/20/2011
<a href="#">Vendor/Customer File and W9s</a>	5/20/2011

# Commonwealth Procurement Card Policy and Procedure



## Commonwealth of Massachusetts

### OFFICE OF THE COMPTROLLER

ONE ASHBURTON PLACE, 9<sup>TH</sup> FLOOR  
BOSTON, MASSACHUSETTS 02108  
TELEPHONE (617) 727-5000  
WWW.MASS.GOV/COMPTROLLER

THOMAS G. SHACK III, ESQ.  
COMPTROLLER

**MMARS Policy: Payments**

**Issue Date: 10/29/08**

**Date Last Revised: 10/29/08**

## Commonwealth Procurement Card Program Policy and Procedure

### Executive Summary

The Commonwealth's Procurement/Credit Card (P-Card) Program establishes the standards for the use of the Commonwealth's P-Card by each card holder Department. Once a Department requests an application for a P-Card, and the CFO completes the training given by the Office of the Comptroller (CTR), the Department Head or his designee authorizes cardholders and determines their individual transaction limits and credit limits. The P-Card model allows for flexible restrictions or targeted purchasing when a Department chooses to authorize multiple Department purchasers. It is the Department and the Cardholder's responsibility to be knowledgeable of and to follow this policy and the procedures that follow, as well as all applicable purchasing laws and guidelines. In addition to the policies in this Chapter, Departments are also responsible for the policies in [Contracts - State Finance Law and General Requirements](#) and any other related contract policies issued by CTR.

The primary goal of the Commonwealth P-Card program is to simplify and expedite a Department's routine purchases under 801 CMR 21.00, including incidental purchases. The program can also be used to minimize reimbursable travel processing costs or as an alternative payment method when purchasing under statewide contracts. The P-Card purchasing process includes pricing inquiry, order placement, delivery of goods, invoices and voucher review. In addition, the program offers individual detailed purchase entries, payment entry and disbursement processing which are significantly streamlined using the P-Card. The Commonwealth P-Card will assist Departments to fulfill immediate or non-office hour purchasing needs and dramatically shorten and simplify the payment cycle processing.

Establishing a comprehensive Internal Control Plan ensures Departmental compliance with the guidance provided in this policy. It is the CFO's responsibility to develop and document appropriate internal control procedures to ensure that P-Card usage is consistent with this document and to develop guidelines for distribution to cardholders. In those instances where it is determined that internal controls are not adequate, CTR has the authority to request policy improvements and/or place card restrictions on the Department until the internal controls are established, documented and implemented.

Departments will be responsible for reconciling receipts with the monthly statement issued by the Contractor and for making timely payments to the Contractor for all P-Card purchases made by the Department during a monthly billing cycle.

Department payment activity is subject to Quality Assurance reviews. A criterion of the quality assurance review includes checking backup documentation for payments, spending authorization, procurement compliance and validation of monthly bill paying statements/reconciliations. MMARS is the official financial record of the Commonwealth. All supporting documentation must reflect the information provided in each

<http://www.mass.gov/comptroller/docs/policies-procedures/accounts-payable/po-ap-ctr-pcard.doc>



# Commonwealth Procurement Card Use Employee Agreement

<http://www.mass.gov/comptroller/docs/forms/accounts-payable/p-card-empl-agreement.doc>

COMMONWEALTH PROCUREMENT CARD USE EMPLOYEE AGREEMENT \*

EMPLOYEE NAME: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

As an employee of the Department, I hereby voluntarily accept a Commonwealth of Massachusetts Procurement Card. I understand that I am not required to accept a Procurement Card as a condition of my employment and that I have the right to refuse to use the Procurement Card. I understand that the Procurement Card is being provided to me as an alternative payment mechanism and that whenever I use the Procurement Card I will be making financial commitments on behalf of the Department. I understand and agree that I shall be accountable for ANY use of the Procurement Card while in my possession and I agree not to allow any other person to have possession of the Procurement Card or to use the Procurement Card for any reason.

I agree to keep the Procurement Card provided to me in a secure place at all times so that the Procurement Card will not be stolen, misplaced, lost, or misused. I agree to verify my possession of the Procurement Card at least once per week and to IMMEDIATELY notify the Statewide Contractor and my Supervisor and Chief Fiscal Officer in the event I discover that the Procurement Card has been lost, misplaced, stolen or otherwise misused. I understand that I will not be held personally liable for unauthorized purchases made on a stolen, misplaced, lost or misused Procurement Card, however the Department may remove my future use of the Procurement Card or take whatever other disciplinary actions authorized under the Department's personnel policies.

I understand that the Department is liable to Bank of America for all charges that I make on the Procurement Card issued for my use. I agree to use the Procurement Card responsibly and in accordance with restrictions and approved purposes in the Department's Procurement Card Policies and Procedures. I agree to use my best efforts to achieve the best value for purchases of commodities or services for the Department and the Commonwealth in accordance with 801 CMR 21.00 and the Procurement Policies and Procedures Handbook specifications for Incidental Purchases.

I agree to use the Procurement Card for approved business purchases only and I agree that the Procurement Card may not be used under any circumstances to purchase items for my personal use or for any use not authorized by the Department. I agree that no purchases made with this card will be for alcohol products. I understand that this card will not be used for the purchase of medical services or with any vendor known by me to be unincorporated. I understand and agree that my Department, the Operational Services Division and the Comptroller's Office may audit my use of the Procurement Card and that these offices may report upon and take whatever appropriate action is deemed necessary to investigate and resolve any discrepancies concerning my use of the Procurement Card. I agree to cooperate fully with any investigation, audit, or resolution process.

I confirm that I have been given copies of, and I have read and agree to follow the internal Department Procurement Card Use Policies and Procedures AND the Commonwealth Policies and Procedures for Procurement Card Use AND the WORKS Procurement Card Agreement. I understand and agree that failure to follow these policies and procedures may result in revocation of my Procurement Card use privileges and may result in other disciplinary actions authorized for employee misconduct in accordance with the Department's Employee Handbook, any applicable Codes of Conduct, State Ethics Commission rules, collective bargaining agreement or other relevant policies.

I understand that my Employee number, which is listed below, will be used on the Bank of America Department Account Designation form for identification purposes only and that no Procurement check will be done against my Employee number. I agree to return the Procurement Card immediately upon a) request of the Statewide Contractor, the Department or the Office of the Comptroller, or b) upon termination of my employment, including retirement, or any anticipated extended leave of absence of more than five (5) days.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Title: \_\_\_\_\_ Employee Number: \_\_\_\_\_

Approving Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approving Supervisor's Title: \_\_\_\_\_

Chief Fiscal Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

COMMONWEALTH PROCUREMENT CARD USE EMPLOYEE AGREEMENT \*

\* Please see the Commonwealth Procurement Card Program Policy and Procedure policy (CTR home page/Policies/Payments) for information on how to use this form.



# Commonwealth of Massachusetts Credit Card Transaction Log

**Commonwealth of Massachusetts Credit Card**

**Transaction Log** State the reason for the purchase on the receipt.

Period From  to

Card Holder Name:	Department:
Card Number:	Phone:
Credit Limit:	Manager's Name

  

#	Date	Vendor	Type of Purchase	Total Purchase Price	Available Balance	Posted on Statement Dated
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
14						
15						
16						
17						
18						
19						
20						
21						
22						
Log Totals						

Statement Totals:   Difference - Should be posted by BofA to other months. If not explain.

ENCLOSE ALL RECEIPTS, MONTHLY STATEMENT AND THE RECONCILIATION, COMPLETE AND SEND TO YOUR APPROVING SUPERVISOR BY / /  TO ENSURE TIMELY PAYMENT.

Cardholder's Signature:  Date:  Manager's Signature:  Date:



# Auditor and Cardholder – User Guide

[Commonwealth of  
Massachusetts Procurement Card  
Auditor & Cardholder User Guide](#)

Commonwealth of Massachusetts  
Procurement Card

*Auditor & Cardholder-User Guide*



# Commercial Card Claims Statement of Disputed Item

## COMMERCIAL CARD CLAIMS STATEMENT OF DISPUTED ITEM

Instructions: Your company should first make good-faith efforts to settle a claim for purchases directly with the merchant. If assistance from Bank of America is required, please complete this form, and mail with required enclosures within 60 days from the billing close date to:

Bank of America – Commercial Card Services Operations  
P. O. Box 53142  
Phoenix, AZ 85072-3142  
FAX (888) 678-6046

Company Name: \_\_\_\_\_  
Account Number: \_\_\_\_\_  
Cardholder Name: \_\_\_\_\_  
This Charge appeared on my statement, billing close date: \_\_\_\_\_  
Transaction Date: \_\_\_\_\_  
Reference Number: \_\_\_\_\_  
Merchant Name/Location: \_\_\_\_\_  
Posted Amount: \_\_\_\_\_ Disputed Amount: \_\_\_\_\_

\_\_\_\_\_  
(Cardholder Signature) (Authorized Participant Signature) (Date) (Phone Number)

### Please Check Only One

1.  **Unauthorized Transaction:** I did not authorize, nor did I authorize anyone else to engage in this transaction. No goods or services represented by the above charge were received by me or anyone I authorized. My Bank of America card was in my possession at the time of the transaction.
2.  **Charge Amount Does Not Agree With Order Authorizing the Charge:** The amount entered on the sales slip was increased from \$ \_\_\_\_\_ to \$ \_\_\_\_\_. I have enclosed a copy of the unaltered sales slip.
3.  **Merchandise or Services Not Received:** I have not received the merchandise or services represented by the above transaction. The expected date of delivery of services was \_\_\_\_\_. (Please describe your efforts to resolve this matter with the merchant, the date(s) you contacted them and their response.)
4.  **Defective or Wrong Merchandise:** I returned the merchandise on \_\_\_\_\_ because it was (check one):  
\_\_\_\_\_ defective; \_\_\_\_\_ wrong size; \_\_\_\_\_ wrong color; \_\_\_\_\_ wrong quantity.  
(Please describe your efforts to resolve this matter with the merchant, the date(s) you contacted them, their response and proof of the return of merchandise. Please provide a detailed description of the wrong or defective nature of the merchandise.)
5.  **Recurring Charges After Cancellation:** On \_\_\_\_\_ (date), I notified the merchant to cancel the monthly/yearly agreement. Since then my Bank of America account has been charged \_\_\_\_\_ time(s). (Please enclose a copy of the merchant's confirmation of your cancellation request.)
6.  **Recurring Charges Already Paid by Other Means:** I already paid for the goods and/or services represented by the above charge by means other than my Bank of America Commercial Card. (Please provide a copy of the front and back on the cancelled check, money order, cash receipt, credit card statement, or other documentation as proof of purchase/payment. Describe your efforts to resolve this matter directly with the merchant, the date(s) you contacted them, and their response.)
7.  **Credit Appears as a Charge:** The enclosed Credit Voucher appeared as a charge on my Bank of America Commercial Card account.
8.  **Credit From Merchant Not Received:** I did not receive credit for the enclosed Credit Voucher within 30 calendar days from the date it was issued to me by the merchant shown above. (Please describe your efforts to resolve this matter with the merchant, the date(s) you contacted them and their response. Provide a detailed statement explaining your reason(s) for disputing this charge.)
9.  **Hotel Reservation Cancelled:** I made a reservation with the above hotel which I later cancelled on \_\_\_\_\_ (date) at \_\_\_\_\_ (time). I received a cancellation number, which is \_\_\_\_\_. (Please describe how the reservation was cancelled, proof of cancellation and attempts to resolve this issue with the merchant.)  
\_\_\_\_\_ I was not given a cancellation number.  
\_\_\_\_\_ I was not told at the time that I made the reservation that my account would be charged for a "No Show".  
\_\_\_\_\_ I was not informed of the cancellation policy.
10.  **Double or Multiple Charges:** My Bank of America Commercial Card Account has been double charged. The valid charge appeared on \_\_\_\_\_ (date). The duplicate charge(s) appeared on \_\_\_\_\_.
11.  **Do Not Recall the Transaction:** The statement has an inadequate description of the charge. Please supply supporting documentation.
12.  **Other; Above Descriptions Do Not Apply:** Please attach a detailed letter explaining the reason for your dispute and your attempts to resolve this issue with the merchant.

# Procurement Card Setup Forms

## New Procurement Card Company Setup Form<sup>1</sup>

GENERAL INFORMATION	
COMPANY NAME (maximum 25 spaces): NAME OF DEPARTMENT REQUESTING CARD	
CONTACT NAME (maximum 25 spaces):	Kathy Sheppard
CONTACT PHONE NUMBER:	(617) 973-2666
CONTACT EMAIL ADDRESS	Kathy.Sheppard@state.ma.us
PHYSICAL ADDRESS LINE 1 (maximum 36 spaces): ADDRESS OF DEPARTMENT REQUESTING CARD	
PHYSICAL ADDRESS LINE 2 (maximum 36 spaces): ADDRESS OF DEPARTMENT REQUESTING CARD	
PHYSICAL ADDRESS CITY, STATE, ZIP CODE: ADDRESS OF DEPARTMENT REQUESTING CARD	
MAILING ADDRESS LINE 1 (maximum 36 spaces)	Office of the Comptroller
MAILING ADDRESS LINE 2 (maximum 36 spaces)	One Ashburton Place, Room 901
MAILING ADDRESS CITY, STATE, ZIP CODE:	Boston, MA 02108
DEFAULT INFORMATION	
DEFAULT CARDHOLDER NAME LINE 2 (optional):	MA TAX EXMPT ID 046002284
BILLING INFORMATION	
BILLING CYCLE (day of the month between 4th and 27th):	27th
BILLING TYPE:	Corporate
SETTLEMENT METHOD:	EFT
SEND MEMO STATEMENTS TO CARDHOLDERS:	No
NUMBER OF DAYS FROM BILLING CYCLE TO PAY DUE DATE:	25
BILLING FREQUENCY:	Monthly

Company Credit Limit (CTR use only):

Department Head Approval (Required): \_\_\_\_\_ Date: \_\_\_\_\_

Chief Fiscal Officer Approval (Required): \_\_\_\_\_ Date: \_\_\_\_\_

<sup>1</sup> Please see the [Commonwealth Procurement Card Program Policy and Procedure](#) policy (CTR home page/Policies/Payments) for information on how to use this form.

<http://www.mass.gov/comptroller/docs/forms/accounts-payable/p-card-dept-setup.doc>

## New Procurement Cardholder Set up Form<sup>1</sup>

Cardholder Information	
16 digits BofA Corporate Account Number	
Company Name: NAME OF DEPARTMENT REQUESTING CARD	
Name Line 1: OF CARDHOLDER	
Name Line 2:	MA TAX EXMPT ID 046002284
Address Line 1: OF CARDHOLDER	
Address Line 2: OF CARDHOLDER	
City, State, Zip: OF CARDHOLDER	
Work Phone: OF CARDHOLDER	
EMPLOYEE ID: OF CARDHOLDER	
Hierarchy Number:	6602832, (7 digits Company Number)
Email Address: OF CARDHOLDER	
Parameters	
Credit Limit: FILL IN	
Single Purchase Limit: FILL IN	
REQUESTING MCC PROFILES Yes/No (No signifies basic Credit Card Setup)	
Mailing Instructions	
Issue Plastic:	Yes
Delivery Method:	Bulk
Send Cards To:	Kathy Sheppard
Name:	Office of the Comptroller
Address:	One Ashburton Place, Room 901
City, State, Zip:	Boston, MA 02108
Phone Number:	(617) 973-2666

Chief Fiscal Officer Approval (Required): \_\_\_\_\_ Date: \_\_\_\_\_

<sup>1</sup> Please see the [Commonwealth Procurement Card Program Policy and Procedure](#) policy (CTR home page/Policies/Payments) for information on how to use this form.

<http://www.mass.gov/comptroller/docs/forms/accounts-payable/p-card-cardholder-setup.doc>



# Questions?

## Commonwealth of Massachusetts

### Office of the Comptroller

One Ashburton Place, Room 901  
Boston, MA 02108

**[Thomas.Smith-Vaughan@state.ma.us](mailto:Thomas.Smith-Vaughan@state.ma.us)**

Phone: 617-973-2337

Fax: 617-727-2163

**[Kim.Doan@state.ma.us](mailto:Kim.Doan@state.ma.us)**

Phone: 617-973-2313

Fax: 617-727-2163

**[John.Newell@state.ma.us](mailto:John.Newell@state.ma.us)**

Phone: 617-973-2658

Fax: 617-727-2163



