City and County of San Francisco

Controller's Office

P-Card Training

Office of the Controller

Agenda

- P-Card Program Overview
- Form Automation for Card Enrollment, Modification, Replacement & Cancellation
- Key Information for Cardholders and Department Administrators
- Contact Information
- US Bank Access® Online

City and County of San Francisco

Controller's Office

Program Overview

Program Overview

- **Procurement Card (P-Card)**
  - Charge card designed to enable designated City employees to make authorized purchases for:
    - (1) Declared Emergencies and Natural Disasters
    - (2) Employee Reimbursement Items
- **Official City Business use only**
- **Must follow all purchasing and payment policies as defined by Admin Code Chap 21, Chap 6, OCA and CON.**

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General Roles and Responsibilities*

Department Coordinator

- Develop and maintain departmental procedures
- Prepare and submit P-Card forms online
- Ensure program compliance

Approving Official

- Request P-Cards from Department Coordinator for employees under their supervision
- Review and certify reconciled Cardholder Statements of Account
- Forward Cardholder Statement of Account for billing within seven (7) calendar days of statement date

Billing Official

- Review transactions reported by cardholders and approved by approving officials
- Make monthly P-Card payments in FAMIS
- Reconcile account statements, including sales tax review and any cost discrepancies

***Review Controller's P-Card Manual and Department Manuals for full list of responsibilities**

General Roles and Responsibilities (Cont'd)*

Cardholder

- Understanding of City purchasing rules and regulations
- Activate and maintain security of the account number and card
- Know respective transaction and credit limits
- Ensure all purchases are allowable and follow City and Departmental procedures
- Obtain best value for the City when making purchases
- Complete travel/field expense forms, reconcile all transactions, and forward to Approving Official ASAP

***Review Controller's P-Card Manual and Department Manuals for full list of responsibilities**

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Form Automation

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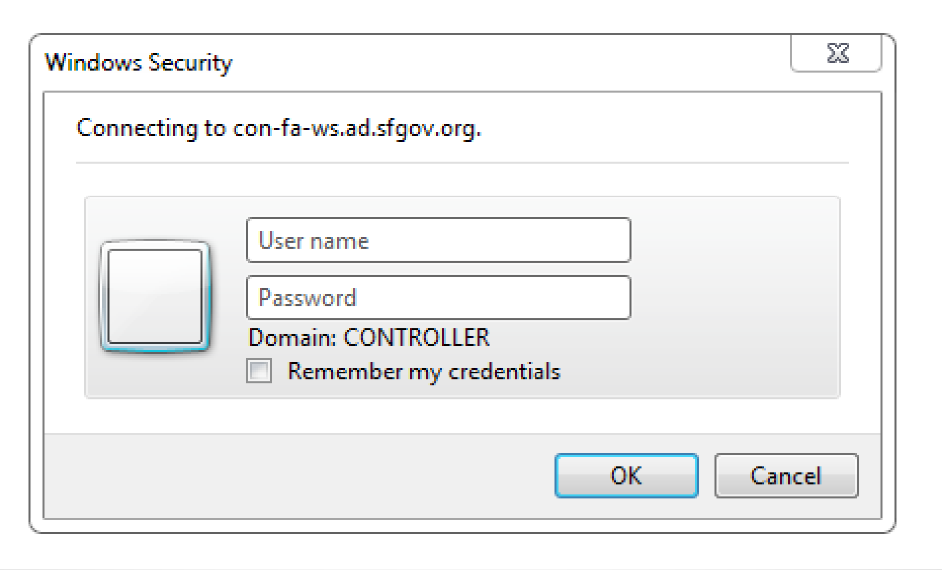
Forms and requests are submitted via an online forms portal. This increases efficiency, eliminates paper use, and reduces turnaround time for each approver.

- Go to https://conforms.sfgov.org to access the Forms Automation portal

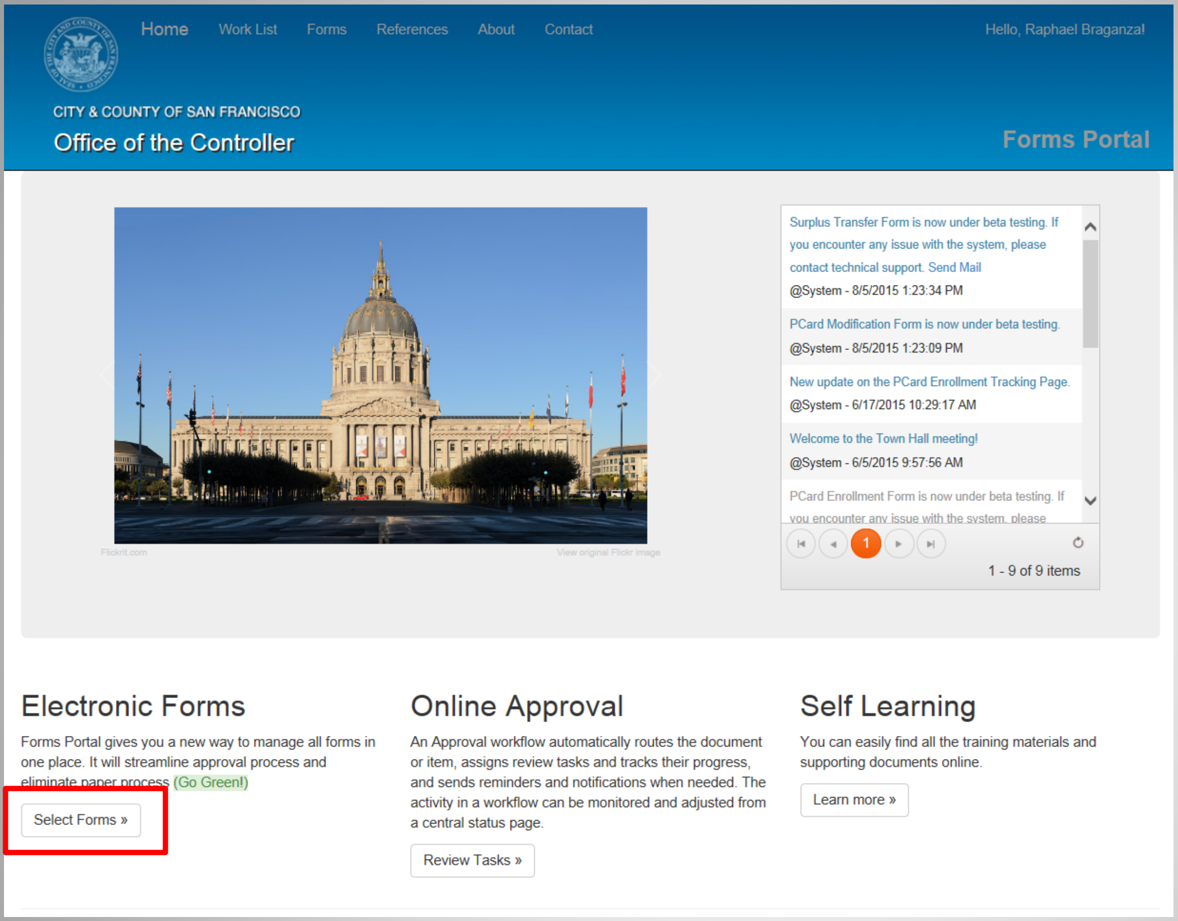


- Use your City Active Directory (AD) credentials to log-in
  - Same Username and Password as Office365, eMerge, etc.

Request a New P-Card

Form Automation

» Initiator Role



The **Initiator** is the first approval step in the workflow. This will be the department coordinator as assigned by their Department head. The initiator will be responsible for submitting all requests relating to P-Card, including new requests, modifications, cancellations, and replacements.

Initiator profiles are marked with specific accessibility. They are the only users allowed to create and submit requests.

1. Click on the “Select Forms” prompt on the Forms homepage to see the list of available forms

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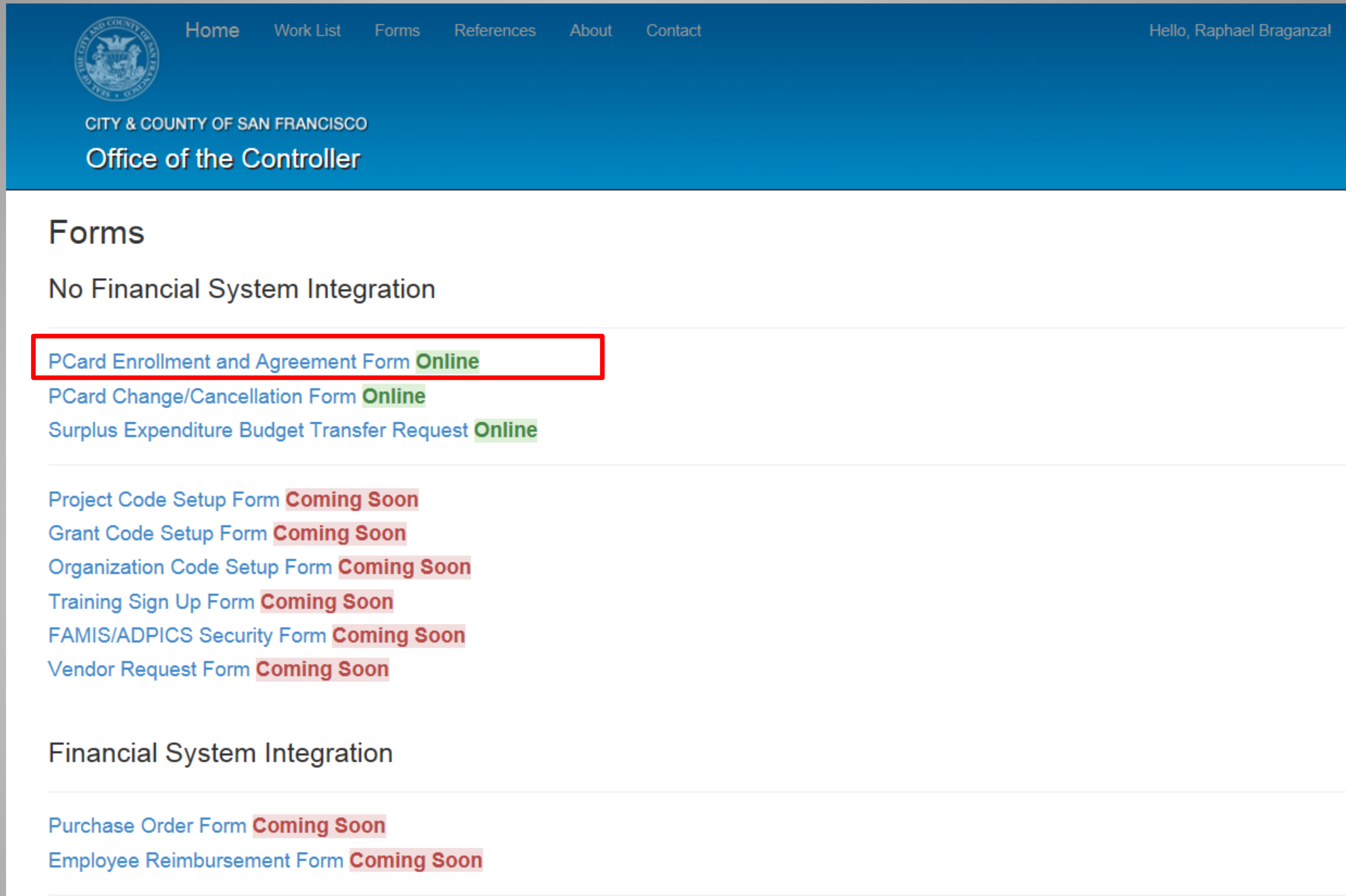
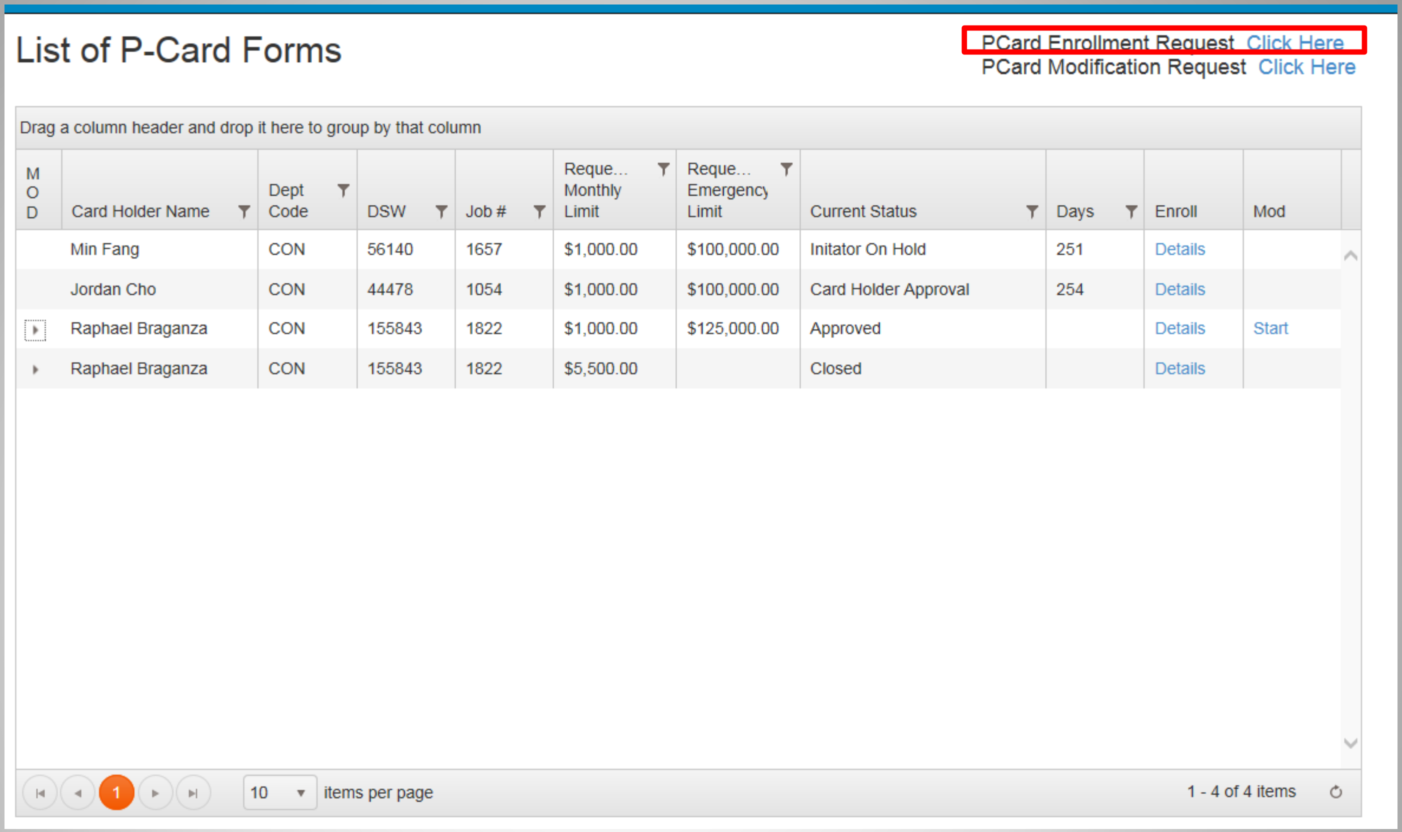


2. When you click on the P-card Enrollment and Agreement Form link, you will be brought to your pending caseload for this application

The caseload page displays the key elements of the P-Card Enrollment transaction.



List of P-Card Forms

PCard Enrollment Request Click Here
PCard Modification Request Click Here

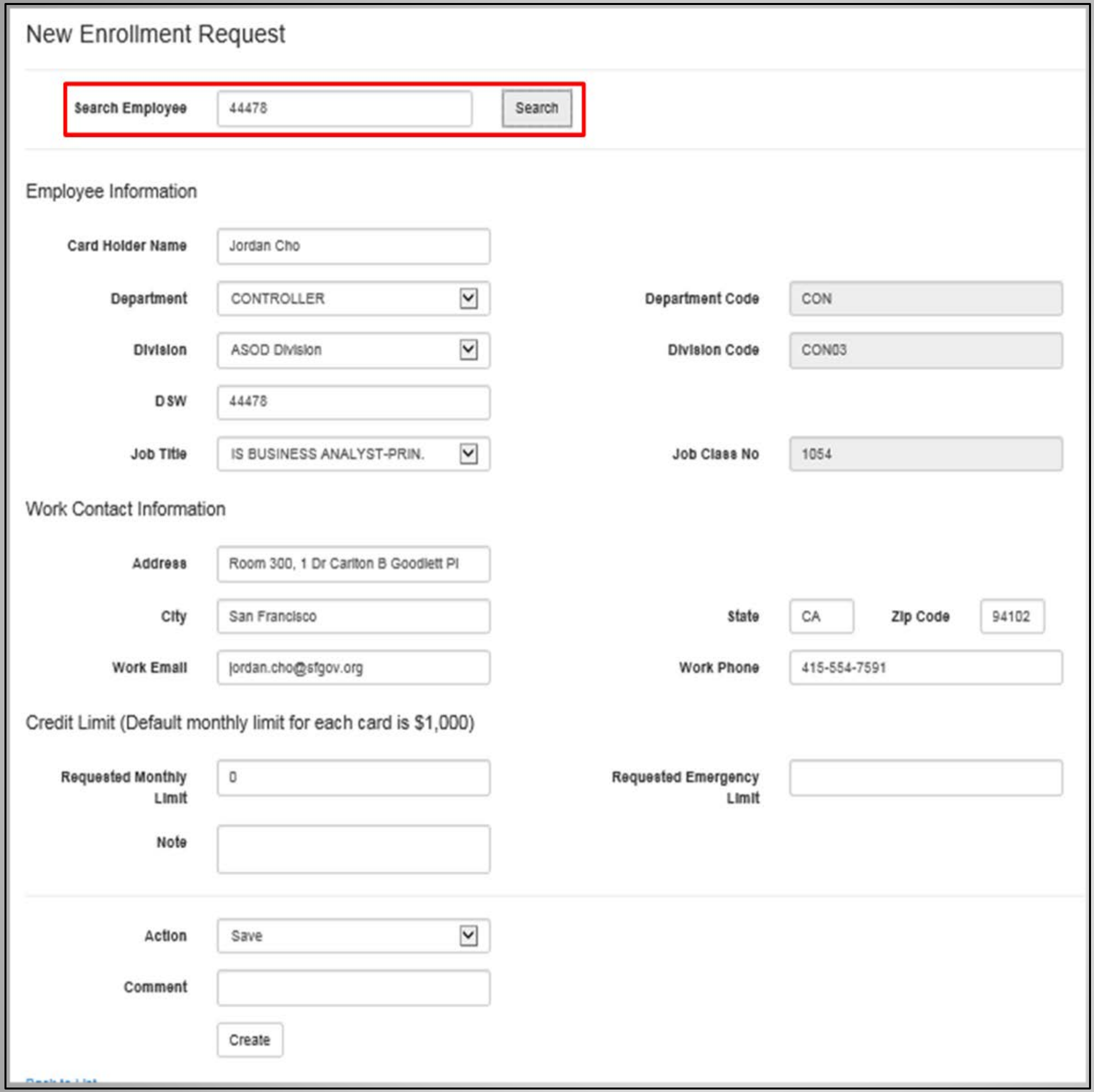
Drag a column header and drop it here to group by that column

MOD	Card Holder Name	Dept Code	DSW	Job #	Reque... Monthly Limit	Reque... Emergency Limit	Current Status	Days	Enroll	Mod
	Min Fang	CON	56140	1657	$1,000.00	$100,000.00	Initator On Hold	251	Details	
	Jordan Cho	CON	44478	1054	$1,000.00	$100,000.00	Card Holder Approval	254	Details	
	Raphael Braganza	CON	155843	1822	$1,000.00	$125,000.00	Approved		Details	Start
	Raphael Braganza	CON	155843	1822	$5,500.00		Closed		Details	

1 | 10 items per page | 1 - 4 of 4 items

The "Details" link this will bring you to the full detail of the individual task.
The caseload has the capability to group and filter the categories, similar to a pivot table.

3. To initiate a new card request, click on the P-Card Enrollment Request link in the upper-right hand corner


New Enrollment Request

Search Employee 44478 Search

Employee Information

Card Holder Name	Jordan Cho		
Department	CONTROLLER	Department Code	CON
Division	ASOD Division	Division Code	CON03
DSW	44478		
Job Title	IS BUSINESS ANALYST-PRIN.	Job Class No	1054

Work Contact Information

Address	Room 300, 1 Dr Carlton B Goodlett Pl		
City	San Francisco	State	CA Zip Code 94102
Work Email	jordan.cho@sfgov.org	Work Phone	415-554-7591

Credit Limit (Default monthly limit for each card is $1,000)

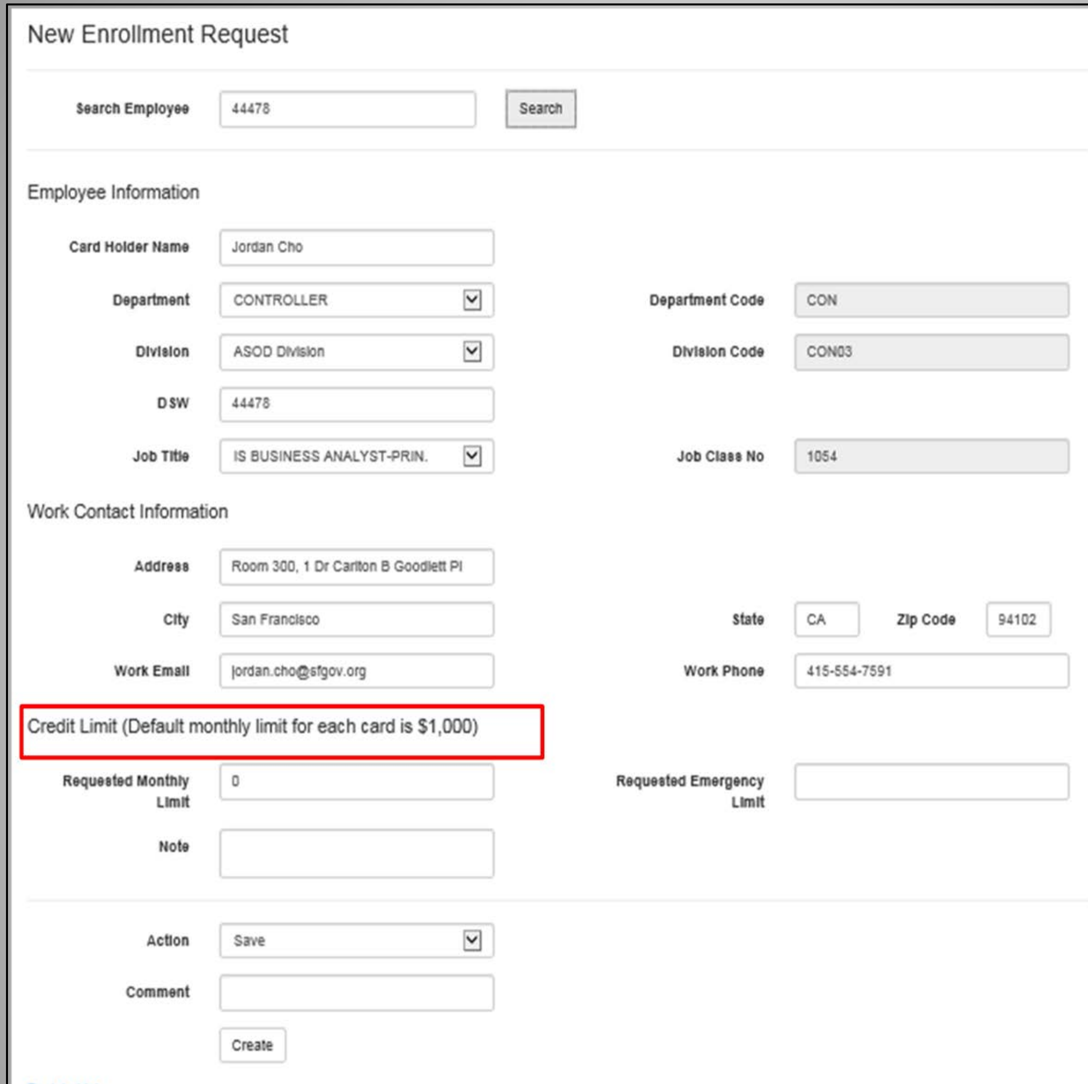
Requested Monthly Limit	0	Requested Emergency Limit	
Note			
Action	Save		
Comment			

Create

4. Input the DSW# of the P-Card holder in the search employee field and click "search"

- Most fields will auto-populate based from the citywide AD. Fields are open to allow initiator to change in case the database is not updated.

- If fields are incomplete, the system will not let the initiator continue



New Enrollment Request

Search Employee: 44478 [Search]

Employee Information

Card Holder Name	Jordan Cho		
Department	CONTROLLER	Department Code	CON
Division	ASOD Division	Division Code	CON03
DSW	44478		
Job Title	IS BUSINESS ANALYST-PRIN.	Job Class No	1054

Work Contact Information

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City	San Francisco	State	CA Zip Code 94102
Work Email	jordan.cho@sfgov.org	Work Phone	415-554-7591

Credit Limit (Default monthly limit for each card is $1,000)

Requested Monthly Limit	0	Requested Emergency Limit	
Note			

Action	Save
Comment	

[Create]

5. Input the requested monthly limit and/or requested emergency limit

- Default limit is $1,000. The field must be changed to a non-zero number before continuing. Put $1,000 as the value if a higher limit is not needed.

- For operational cards, leave the "emergency limit" field blank

6. Under "Action", the initiator may choose to save the request to complete at a later time, or submit the request immediately

List of P-Card Forms

PCard Enrollment Request Click Here
PCard Modification Request Click Here

PCard Enroll Work with Folio PCE-CON-44478 is created.

Drag a column header and drop it here to group by that column

MOD	Card Holder Name	Dept Code	DSW	Job #	Reque... Monthly Limit	Reque... Emergency Limit	Current Status	Days	Enroll	Mod
	Jordan Cho	CON	44478	1054	$1,000.00		Initator On Hold	0	Details	
	ABC	ANC	00000	0912	$1,000.00		Card Holder Approval	21	Details	
▸	Raphael Braganza	CON	155843	1822	$1,000.00	$25,000.00	Approved		Details	Start
▸	Raphael Braganza	CON	155843	1822	$1,000.00		Closed		Details	
	Jerome Hou	CON	41629	1044	$1,000.00		Rejected		Details	
	Jerome Hou	CON	41629	1044	$1,000.00		Rejected		Details	
	Jerome Hou	CON	41629	1044	$1,000.00		Rejected		Details	
▸	Jerome Hou	CON	41629	1044	$1,000.00		Approved		Details	Start
	Dora Okal	CAT	43222	0931	$10,000.00		Department Approval	58	Details	
	Dora Okal	CAT	43222	0931	$10,000.00		Department Approval	58	Details	

1 2 3 — 10 items per page — 1 - 10 of 27 items

From: CON ESystem Staging <CON_ESystem_Staging@sfgov.org>
Sent: Thu 8/6/2015 7:53 PM
To: Cho, Jordan (CON)
Cc:
Subject: PCard_Enroll - Initator On Hold: PCE-CON-44478 (7115-2213)

Dear PCard_Enroll users,

PCE-CON-44478 is In Process
Task is saved by jordan.cho@sfgov.org.

This is to notify you that Forms Portal user has submitted a Enrollment Request for a Purchasing Card. As a listed cardholder/approver, the application is currently in your queue for approval.
Please complete your step as soon as possible. Once final review by the Controller's Office is complete, you will receive a notification indicating whether the application has been approved or denied.
Please click on the following link to access the pending application:

http://CON-FA-WS-STG/FAPCardEnrolls/Approve/7115-2213

- When saving, the initiator will receive a message confirming the task has been created. They will also receive an e-mail notification.

- To access the task, click on the blue hyperlink at the bottom of the notification e-mail

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Controller's Office

Work List

Drag a column header and drop it here to group by that column

Process	Folio	Description	Last Action by	Last Action date	Action
PCard_Enroll	PCE-CON-44478	Initator On Hold	jordan.cho@sfgov.org	08/06/2015 07:52 PM	Review
SurplusTransfer	SUR-CON-2	Controller Approval	jerome.hou@sfgov.org	07/31/2015 02:20 PM	Review
SurplusTransfer	SUR-CON-2	Controller AOSD Director Approval	jerome.hou@sfgov.org	07/31/2015 02:20 PM	Review
SurplusTransfer	SUR-CON-3	Department Approval	jerome.hou@sfgov.org	07/27/2015 10:08 AM	Review

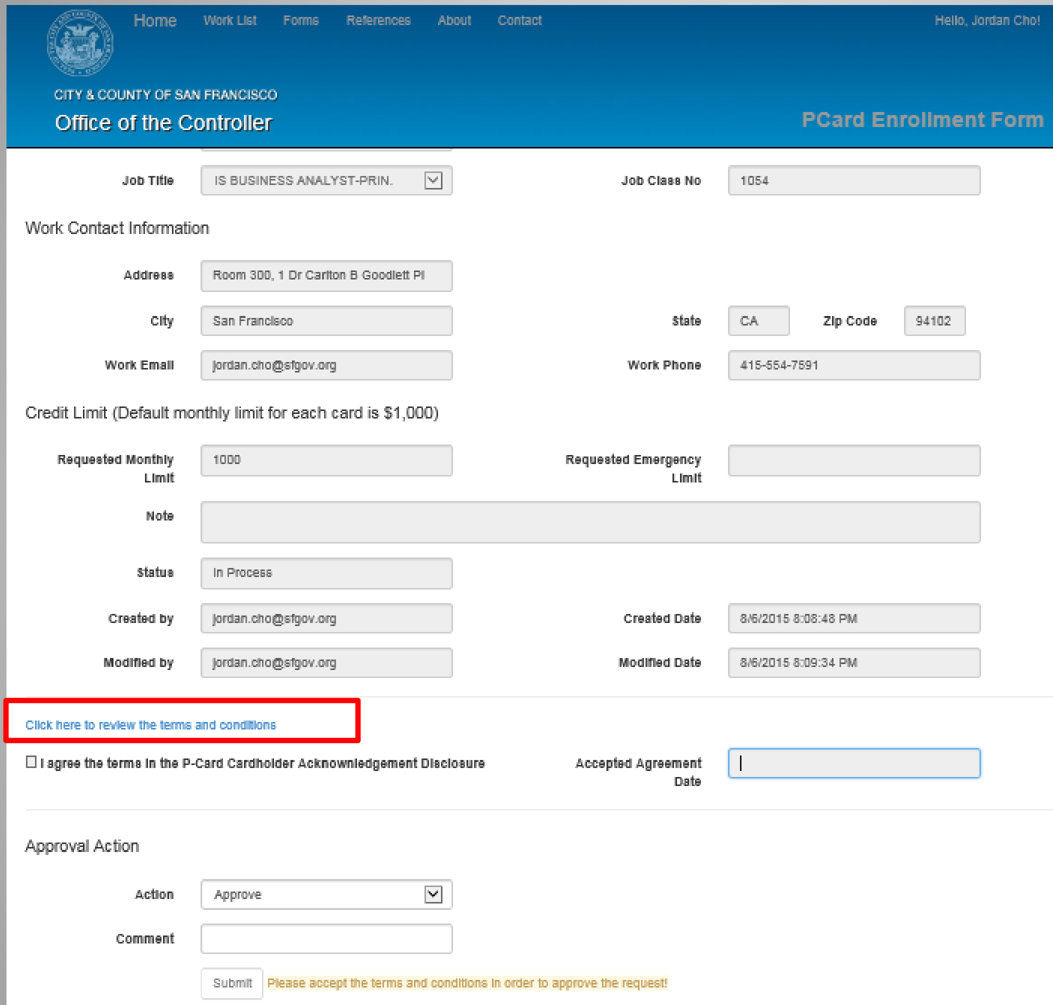
- The user can also reach the task by clicking on the application directly from their Work List queue

- Once the task is open, the initiator can:

  - **Cancel** – Cancel this transaction completely
  - **Save** – Save and come back later to continue processing the task
  - **Submit** – Proceed to next approval level

- Once the task is submitted, the request will process and move forward to the next approval step

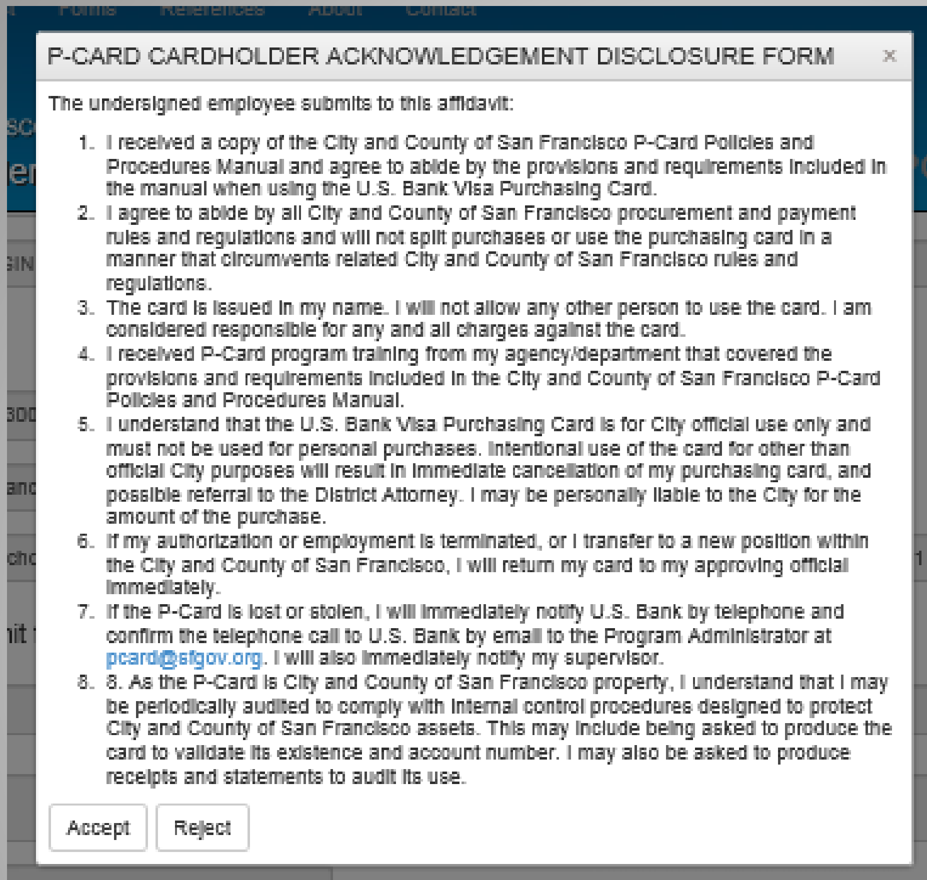
» P-Card Holder Role



The **P-Card Holder** is the next approval step in the workflow. The holder will review the information created by the initiator and either approve or reject the request. A rejection of the request will require a reason for rejection and sends the request back to the initiator.

1. Begin by pulling up the task, either through the e-mail notification or the active workflow.

2. If the details are correct and the cardholder wishes to proceed, they must first review the terms and conditions. Click on the link to pull up the document.



P-CARD CARDHOLDER ACKNOWLEDGEMENT DISCLOSURE FORM

The undersigned employee submits to this affidavit:

1. I received a copy of the City and County of San Francisco P-Card Policies and Procedures Manual and agree to abide by the provisions and requirements included in the manual when using the U.S. Bank Visa Purchasing Card.
2. I agree to abide by all City and County of San Francisco procurement and payment rules and regulations and will not split purchases or use the purchasing card in a manner that circumvents related City and County of San Francisco rules and regulations.
3. The card is issued in my name. I will not allow any other person to use the card. I am considered responsible for any and all charges against the card.
4. I received P-Card program training from my agency/department that covered the provisions and requirements included in the City and County of San Francisco P-Card Policies and Procedures Manual.
5. I understand that the U.S. Bank Visa Purchasing Card is for City official use only and must not be used for personal purchases. Intentional use of the card for other than official City purposes will result in immediate cancellation of my purchasing card, and possible referral to the District Attorney. I may be personally liable to the City for the amount of the purchase.
6. If my authorization or employment is terminated, or I transfer to a new position within the City and County of San Francisco, I will return my card to my approving official immediately.
7. If the P-Card is lost or stolen, I will immediately notify U.S. Bank by telephone and confirm the telephone call to U.S. Bank by email to the Program Administrator at pcard@sfgov.org. I will also immediately notify my supervisor.
8. 8. As the P-Card is City and County of San Francisco property, I understand that I may be periodically audited to comply with internal control procedures designed to protect City and County of San Francisco assets. This may include being asked to produce the card to validate its existence and account number. I may also be asked to produce receipts and statements to audit its use.

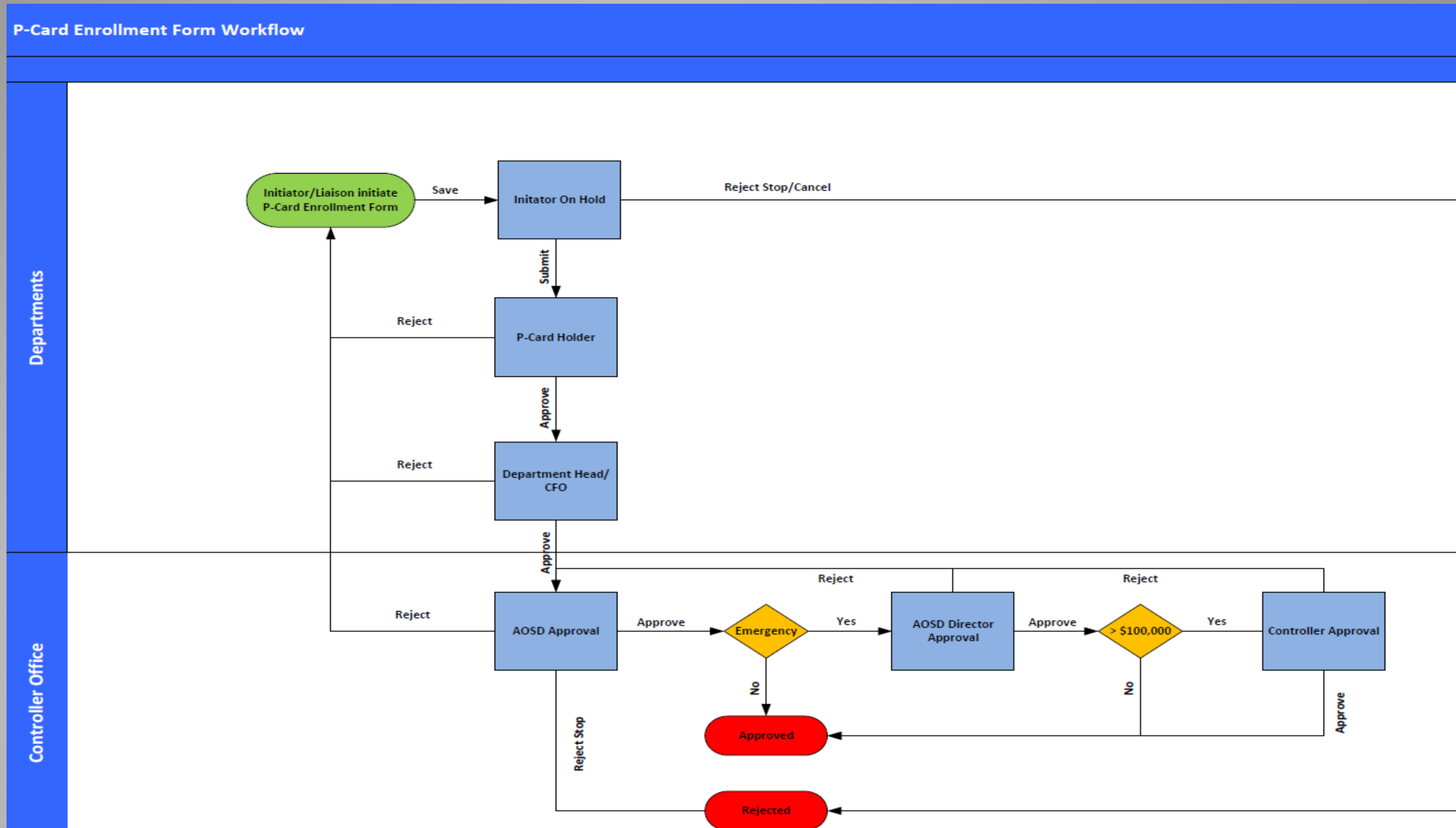
Accept Reject

- The cardholder disclosure form will appear as a pop-up window.
- Review the document and click "Accept" to proceed with the task. Note that if the user clicks on "Reject", the request will not be able to proceed to the next level and the request will not be processed.
- Once the user chooses "Accept", the check box next to the Terms and Conditions Agreement will automatically be marked. A timestamp will also generate. Once these have populated, the cardholder may choose to approve and submit the request. The task will be sent to the next approval step for processing.

Click here to review the terms and conditions

☑ I agree the terms in the P-Card Cardholder Acknownledgement Disclosure

Accepted Agreement Date: 2015-08-07T03:31:48.027Z



This illustrates the workflow once the enrollment request is submitted.

Initiator > P-Card Holder > Department Head/CFO > AOSD, Controller's Office

- Once final approval is processed, the Initiator and P-Card Holder will receive a notification e-mail that the request has been approved. The P-Card administrators will request the new card from US Bank and will work directly with the department coordinator to distribute the plastic

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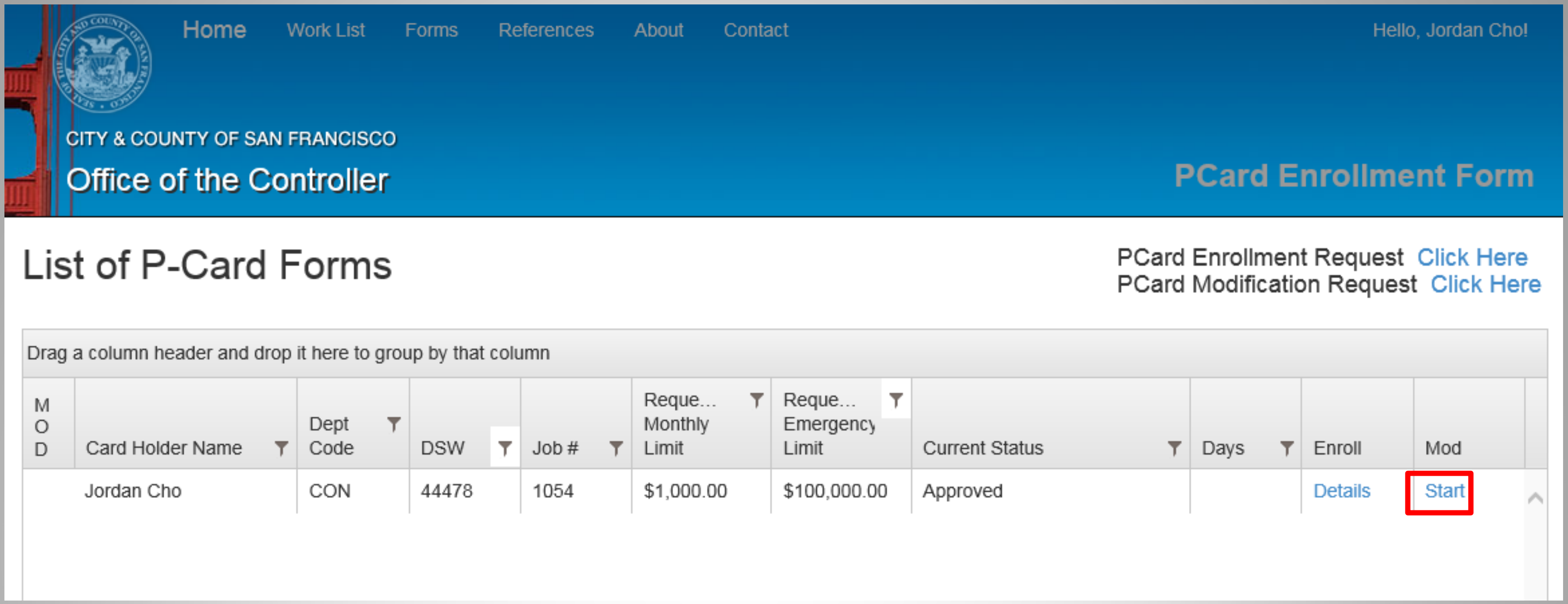
Modify, Replace, or Cancel a P-Card

Form Automation

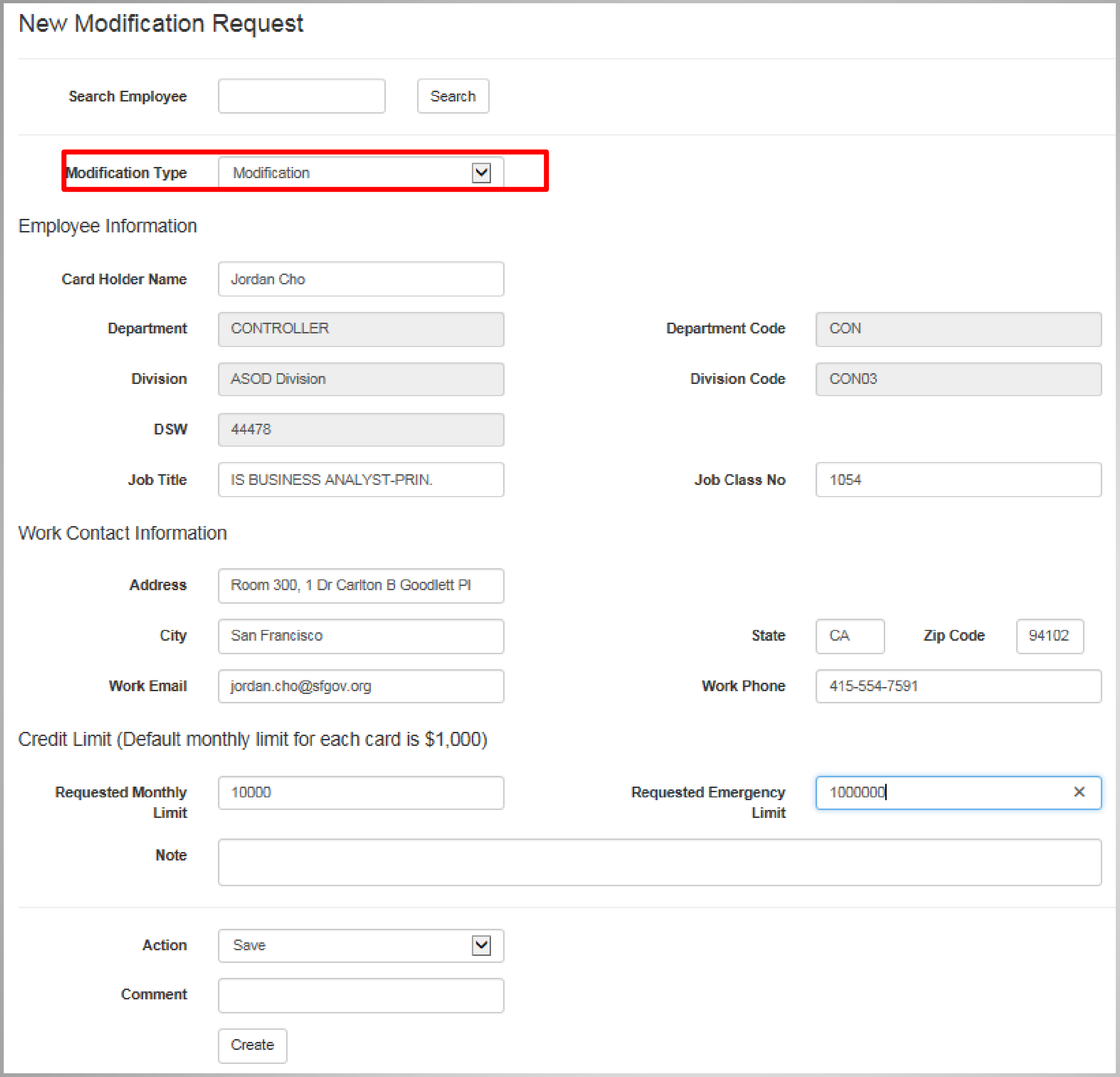
» Initiator Role



In the modification module, the system will validate the P-Card Holder to have an approved enrollment before allowing a modification to be initiated.

- If you do not see the "Start" hyperlink in the mod column, this means that an enrollment or modification is pending approval

1. Click on the "Start" hyperlink next to the card you wish to modify, replace, or cancel. You can also click next to the "Modification Request", but you will need to manually search for the subject cardholder


New Modification Request

Search Employee [ ] Search

Modification Type: Modification

Employee Information

Card Holder Name	Jordan Cho		
Department	CONTROLLER	Department Code	CON
Division	ASOD Division	Division Code	CON03
DSW	44478		
Job Title	IS BUSINESS ANALYST-PRIN.	Job Class No	1054

Work Contact Information

Address	Room 300, 1 Dr Carlton B Goodlett Pl		
City	San Francisco	State / Zip Code	CA / 94102
Work Email	jordan.cho@sfgov.org	Work Phone	415-554-7591

Credit Limit (Default monthly limit for each card is $1,000)

Requested Monthly Limit	10000	Requested Emergency Limit	1000000

Note

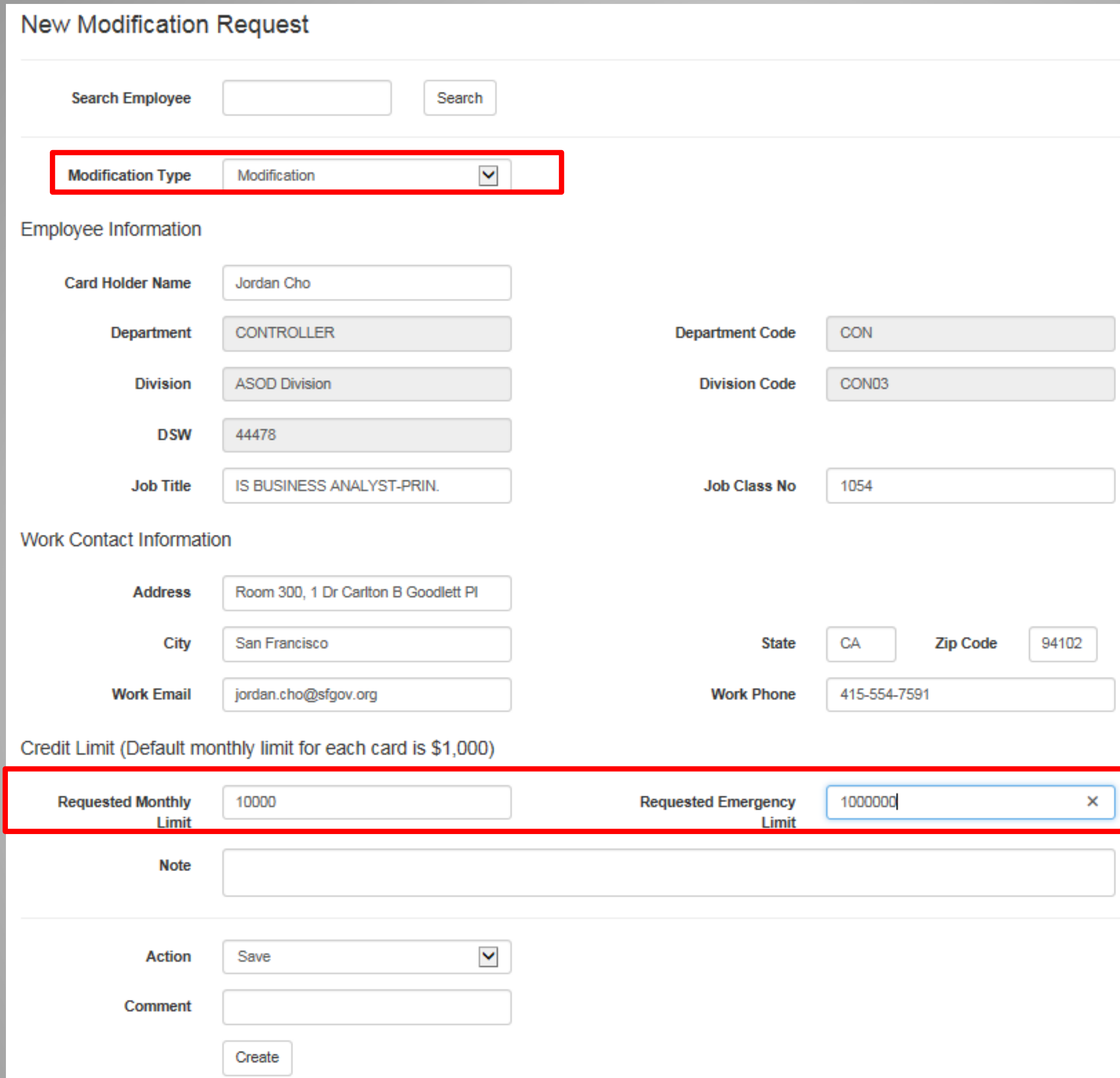
Action: Save

Comment

Create

The initiator will have the following options under modification type:

- **Modification** – Change monthly limit or emergency limit amount
- **Cancel** – Cancel the P-Card account
- **Replacement** – Replace a lost/misplaced card



If "**Modification**" is selected, the initiator will need to change the "Requested Monthly Limit" and/or "Requested Emergency Limit"

If "**Cancel**" is selected, the initiator will need to choose one of the following reasons:

- Employment Terminated
- Employee transferred
- Employee assumed other responsibilities
- Employee is no longer eligible
- Other – Please Specify

If "**Replacement**" is selected, the initiator will need to choose one of the following reasons

- Correction in cardholder name
- Other – Please specify

- Once fields are complete, submit the task to proceed to the approval level

» Approver Roles

Home | Work List | Forms | References | About | Contact

Hello, Jordan Cho!

CITY & COUNTY OF SAN FRANCISCO
Office of the Controller

PCard Modification Form

Controller AOSD Director Approval

Modification Type	Modification

Employee Information

Card Holder Name	Jordan Cho		
Department	CONTROLLER	Department Code	CON
Division	ASOD Division	Division Code	CON03
DSW	44478		
Job Title	IS BUSINESS ANALYST-PRIN.	Job Class No	1054

Work Contact Information

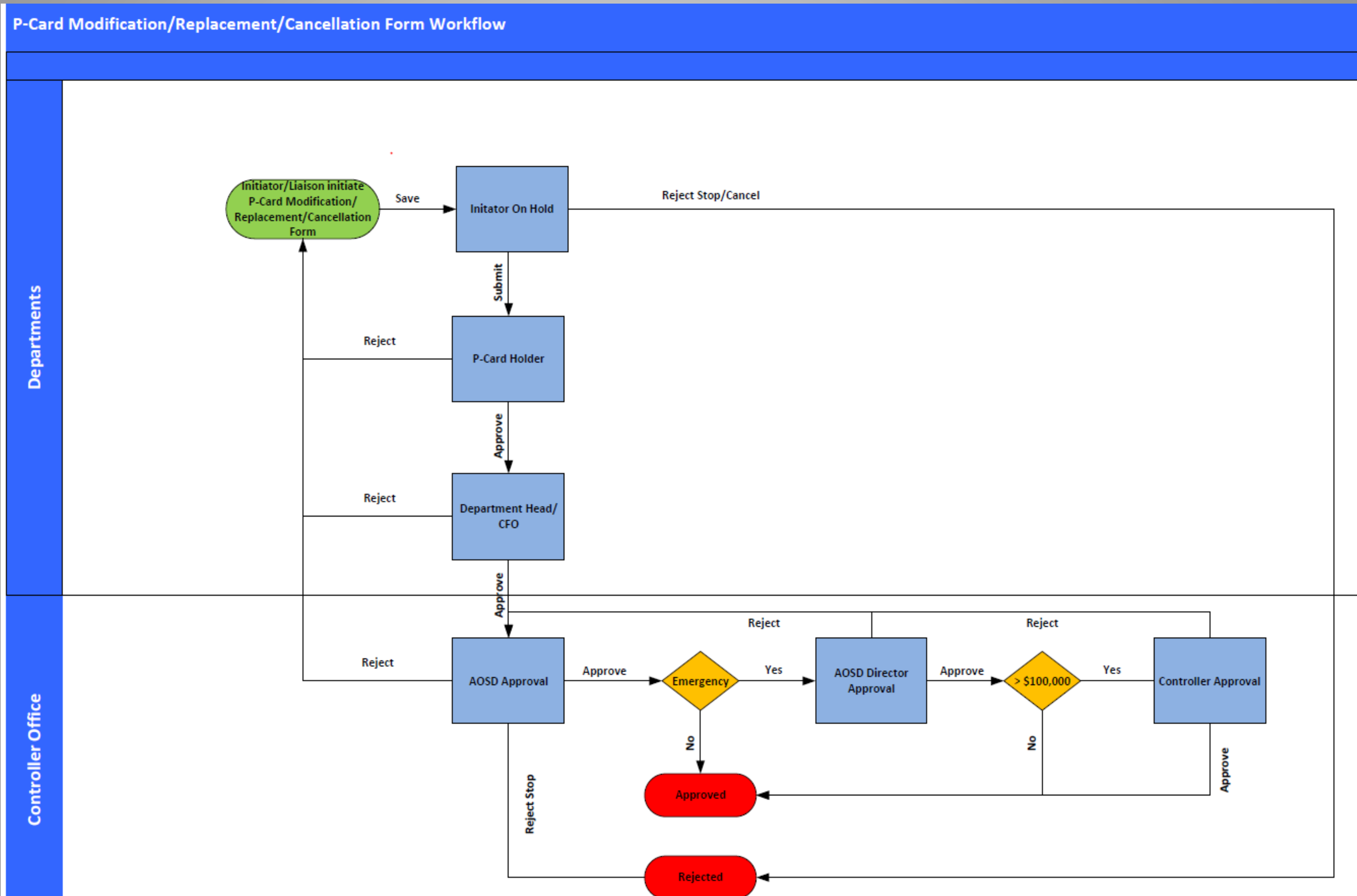
Address	Room 300, 1 Dr Carlton B Goodlett Pl				
City	San Francisco	State	CA	Zip Code	94102
Work Email	jordan.cho@sfgov.org	Work Phone	415-554-7591		

Credit Limit (Default monthly limit for each card is $1,000)

Current Monthly Limit	1000	Current Emergency Limit	100000
Requested Monthly Limit	10000	Requested Emergency Limit	1000000
Note			
Status	In Process		
Created by	jordan.cho@sfgov.org	Created Date	8/7/2015 2:51:14 PM
Modified by	jordan.cho@sfgov.org	Modified Date	8/7/2015 4:30:51 PM
Action	Approve		
Comment			

Approval tasks for a modification, replacement, or cancellation are the same as approving a new card.

Approvers will be able to see the new requested monthly limits, or the reasons for replacement and/or cancellation



This illustrates the workflow once the modification, replacement, or cancellation is submitted.

Important Card Information

Card Activation

- Call U.S. Bank at 1-800-344-5696 to activate your account.

- The following elements will be needed:
  - Card Number
  - Zip Code
  - Last Four Digits of DSW Number
  - Business Telephone Number

1. **Prompt: "Welcome to Corporate Payment Systems Customer Service. Please enter your 16-digit account number"**
   - Enter Card Number

2. **Prompt: "Please enter the five-digit ZIP code of your mailing address."**
   - Enter Zip Code of work address

Card Activation (Cont'd)

3. **Prompt: "To activate your account, please key in the last four digits of your social security number"**
   - Enter the last four digits of your Employee ID (DSW Number)
   - **Do not enter your SSN**

4. **Prompt: "Please enter your business telephone number, beginning with the area code."**
   - Enter business telephone number as submitted via the P-Card Enrollment

5. **Additional Prompt: US Bank may ask you to enter your cell phone number**
   - You may decline; This is not required

6. **"Your account has been successfully activated. Thank you."**

Paying with P-Card

- When placing an Internet, mail or telephone order, you will be asked by the merchant to provide your name, account number, account expiration date, CVV2 and/or mailing address.

- Note the mailing address is the work mailing address used during the P-Card enrollment

- Retain receipts for verification against Cardholder Statement

Credit Limit

- Default credit limit: $1,000.
- For credit limit changes:
  - Provide justification in the P-Card Modification Form online for credit limit changes.
  - P-Card Administrator at AOSD will contact US Bank and change the limit upon approval of the request.
  - For disaster card limits, requests can be sent to AOSD **in advance** for review and approval, and will be kept on file.

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Foreign Transactions

- Transactions initiated in a foreign currency will post to the statement in U.S. dollars. U.S. Bank will provide the foreign dollar amount and the exchange rate applied at the time the transaction was processed.

- A Foreign Transaction fee of 2.5% will be charged and incorporated into the exchange rate that appears.

Disputes

- **Examples**
  - **Merchandise/Service not received**
    - Charged for a transaction but the merchandise or service has not been received
  - **Merchandise returned**
    - Purchasing card account has been charged for a transaction(s), but the merchandise has been returned
  - **Unauthorized purchases**
    - Charge on purchasing card account that you did not participate in and did not authorize
  - **Duplicate processing**
    - Charge on purchasing card account that represents a multiple billing
  - **Unrecognized Charge**
    - Charge on purchasing card that is not recognized. Copy of the documentation received from the merchant to certify the charge (sales draft, invoice) will be sent to the account holder for review

Disputes Continued

- During a dispute investigation, the amount of the transaction will be suspended. You will still see the amount included in your balance, but will not be required to pay for the suspended portion of your bill.

- **Steps for disputing a transaction:**

1. Attempt to contact the merchant; if not resolved,
2. Contact U.S. Bank ASAP (no later than 60 days after the transaction) by one of the following:

    - Filling out the dispute interview on Access Online explaining the reason for filing the dispute and the transaction information
    - Calling 1-800-344-5696

Lost/Stolen Card

- Immediately notify both your Department Coordinator and U.S. Bank Customer Service at 1-800-344-5696 if your purchasing card is lost or stolen, or if you believe your account number has been compromised in any way.
- Please do **not** request a new card. P-Card Administrators will request the card upon receipt of the online replacement form.

Card Cancellation

- Immediately notify your Department Coordinator and surrender your card if you:

  > Hold a different position

  > Transfer to a different City department

  > Separate from the City

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P-Card Statement

- Statement will be generated at the close of business on the 25th day of every month. If the 25th falls on a weekend, the cycle will end on the previous business day.

- At the close of each billing cycle, your statement is available in Access Online. The Cardholder statement will itemize each transaction that was posted to your P-Card during the past billing cycle.

- **Card payment is due 14 days from the statement date.**

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Card Payment

- Review your Cardholder statement for accuracy
- Submit supporting documents to department accounting for card payment processing
  - Complete Field Expense Form or Travel Expense Form
  - Attach original receipts for all purchases

Prompt Payment

- In the event prompt payment is not made to U.S. Bank, your department is subject to a late payment penalty and is also subject to account suspension and account cancellation actions.

FIELD EXPENSE FORMS

City and County of San Francisco

Controller's Office

Form 300.xls

CITY AND COUNTY OF SAN FRANCISCO — SHEET NO. ______

FIELD EXPENSE FORM

Dept: ______________ **Date:** ______________ , 20___

Reimbursement is requested for field expense on official business for month of: ______________ , 20___

DATE	PURPOSE	TRAVEL (From-To)	RT Y/N	ODOMETER READINGS	MILES	PARKING METER	CAR-FARE	TELE-PHONE	OTHER (Receipt Required)
Subtotal Parking Meter, Carfare, Telephone & Other						$ -	$ -	$ -	$ -
Total of last four columns above									$ -
Make and Model Car		License Number		Total Miles	0	Rate Per Mile	$0.575		-
mileage and expense incurred in official business of the City and County of San								TOTAL	$ -
LAST 4 DIGIT OF P-CARD:			PR#				PAID BY P-CARD		
								TOTAL DUE TO EMPLOYEE	$ -

Use additional Sheets as needed, numbering each sheet, totaling and certifying on last sheet for month. For Round Trip, check "RT" column.

INSTRUCTIONS: Enter Odometer Reading at start and end c continuous driving on City business and extend mileage. Receipt or explanation required for "Other" expense.

Signature of Department Head — Expense incurred by (signature of employee)

Amount charged to Purchasing Card

Vendor ID Numbers

Department	FAMIS Vendor ID Number
AIR	P00001
CAT	P00002
DEM	P00003
HSA	P00004
PUC	P00005
TIS	P00006

Department	FAMIS Vendor ID Number
CON	P00007
DPH-LHH	P00008
FIR	P00009
ECN	P00010
RET	P00011
MYR-MOH	P00012

- Be SURE to use the correct Vendor ID Number for your department when processing payment in FAMIS
- Each Vendor ID is linked to each department's managing account; if you do not pay the correct Vendor ID, your department's statement will not reflect the payment

Contact Information

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Who to Contact

Issue	Contact
New Card Enrollment	Department Coordinator
Change of Credit Limit	Department Coordinator
Change of Employment Status	Department Coordinator
Activation of P-Card	U.S. Bank
Access to Access Online	U.S. Bank
Lost/Stolen Card	U.S. Bank and Department Coordinator
Fraudulent Charges	U.S. Bank and Department Coordinator
Billing Disputes	U.S. Bank and Department Coordinator

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US Bank

U.S Bank Customer Service

- Toll Free: 800-344-5696
- Outside the U.S. call collect: 701-461-2010

When contacting U.S. Bank, you will be asked for

- Business telephone number
- Business zip code
- Last four digits of your DSW number (when prompted for SSN, please provide DSW #)
- 16-digit account number

City and County of San Francisco

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P-Card Program Administrators

- **Min Fang**
  - Controller's Office - AOSD
  - 415-554-5218
  - pcard@sfgov.org

- **Raphael Braganza**
  - Controller's Office - AOSD
  - 415-554-7594
  - pcard@sfgov.org

Access® Online

Access® Online

- Access® Online is the online banking system for U.S. Bank
- Cardholders gain access through self registration
- Department Coordinators request access for Department Approvers / Billing Officials through the P-Card Administrator (CON).

https://access.usbank.com

City and County of San Francisco

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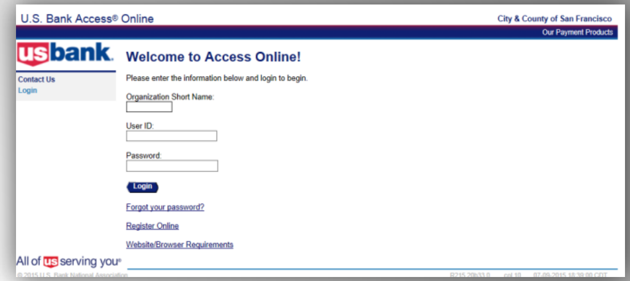
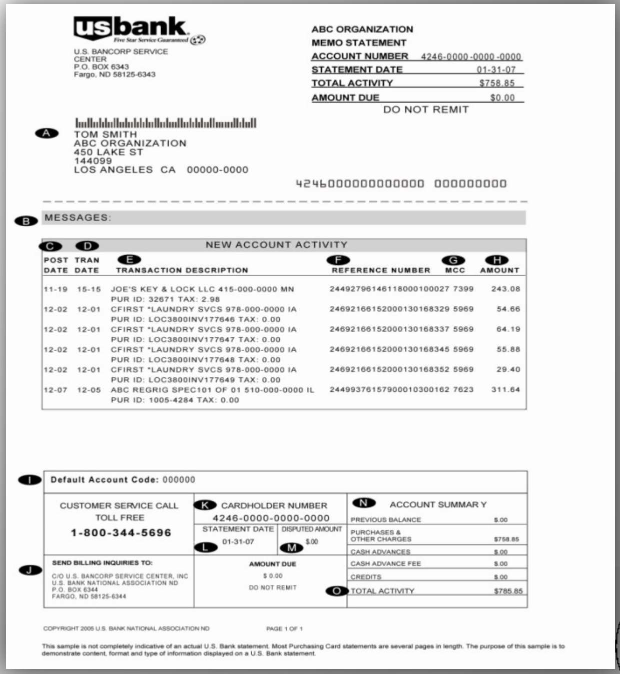
Access® Online

Cardholder Access

- Self Registration
- Logging In
- Find and Print Account Statement




usbank Five Star Service Guaranteed

U.S. BANCORP SERVICE CENTER
P.O. BOX 6343
Fargo, ND 58125-6343

ABC ORGANIZATION
MEMO STATEMENT
ACCOUNT NUMBER 4246-0000-0000-0000
STATEMENT DATE 01-31-07
TOTAL ACTIVITY $758.85
AMOUNT DUE $0.00
DO NOT REMIT

A TOM SMITH
ABC ORGANIZATION
450 LAKE ST
144099
LOS ANGELES CA 00000-0000

4246000000000000 000000000

B MESSAGES:

NEW ACCOUNT ACTIVITY

C POST DATE	D TRAN DATE	E TRANSACTION DESCRIPTION	F REFERENCE NUMBER	G MCC	H AMOUNT
11-19	15-15	JOE'S KEY & LOCK LLC 415-000-0000 MN PUR ID: 32671 TAX: 2.98	24492796146118000100027	7399	243.08
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177646 TAX: 0.00	24692166152000130168329	5969	54.66
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177647 TAX: 0.00	24692166152000130168337	5969	64.19
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177648 TAX: 0.00	24692166152000130168345	5969	55.88
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177649 TAX: 0.00	24692166152000130168352	5969	29.40
12-07	12-05	ABC REGRIG SPEC101 OF 01 510-000-0000 IL PUR ID: 1005-4284 TAX: 0.00	24499376157900010300162	7623	311.64

I **Default Account Code:** 000000

CUSTOMER SERVICE CALL TOLL FREE
1-800-344-5696

K CARDHOLDER NUMBER 4246-0000-0000-0000
L STATEMENT DATE 01-31-07
M DISPUTED AMOUNT $.00

N ACCOUNT SUMMARY

PREVIOUS BALANCE	$.00
PURCHASES & OTHER CHARGES	$758.85
CASH ADVANCES	$.00
CASH ADVANCE FEE	$.00
CREDITS	$.00
O TOTAL ACTIVITY	$785.85

J **SEND BILLING INQUIRIES TO:**
C/O U.S. BANCORP SERVICE CENTER, INC
U.S. BANK NATIONAL ASSOCIATION ND
P.O. BOX 6344
FARGO, ND 58125-6344

AMOUNT DUE
$ 0.00
DO NOT REMIT

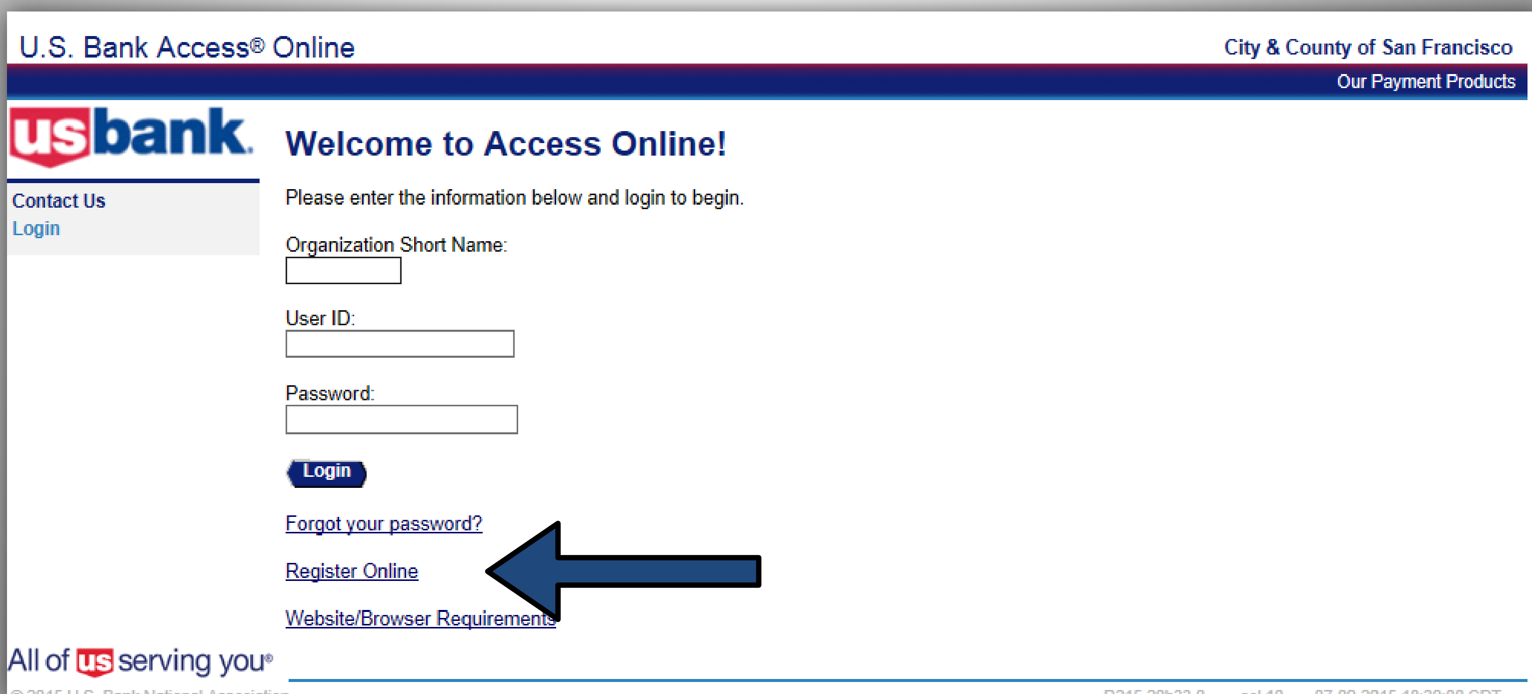
COPYRIGHT 2005 U.S. BANK NATIONAL ASSOCIATION ND PAGE 1 OF 1

This sample is not completely indicative of an actual U.S. Bank statement. Most Purchasing Card statements are several pages in length. The purpose of this sample is to demonstrate content, format and type of information displayed on a U.S. Bank statement.

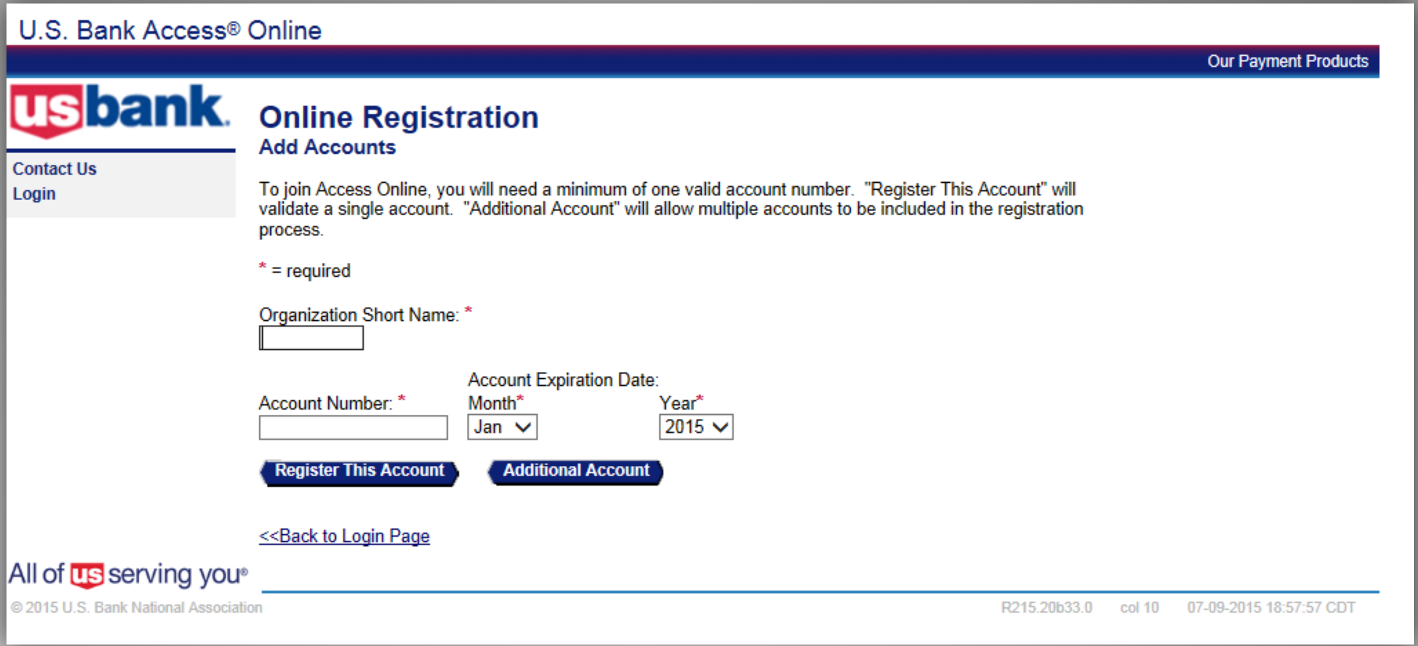
Self Registration

Cardholder may self register for an Access Online account when they receive their purchasing card

1. Go to https://access.usbank.com and click on "Register Online"



2. Fill out fields as requested

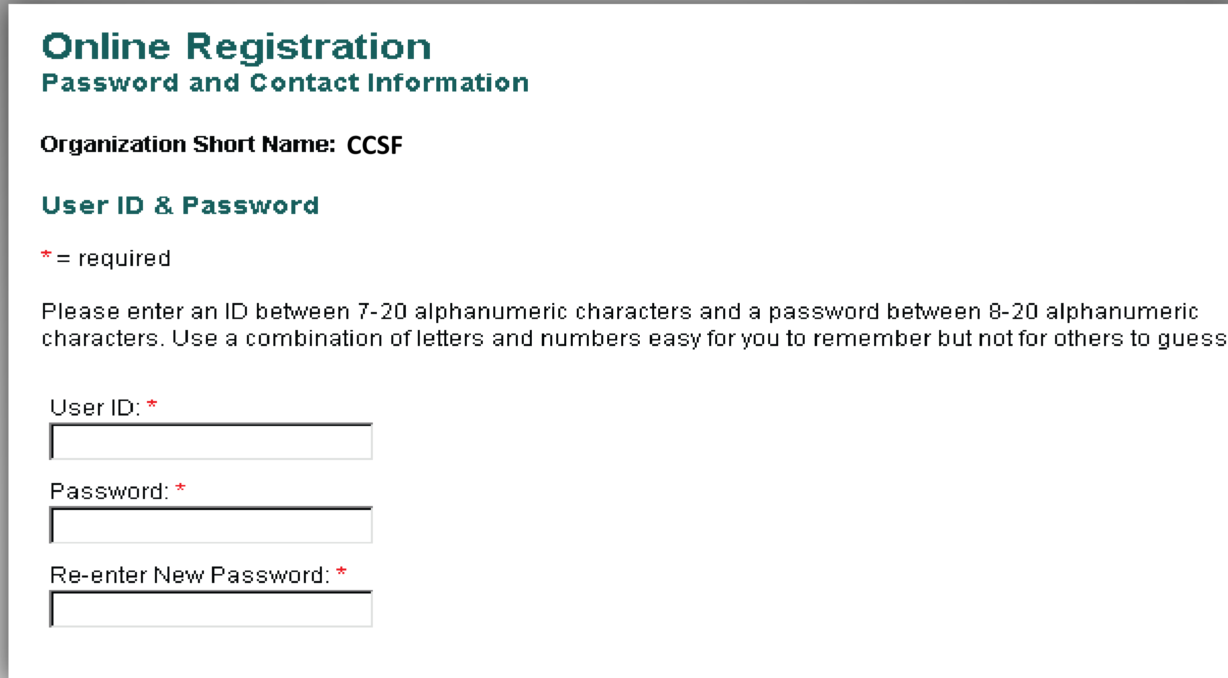


- **Organization Short Name**: CCSF
- **Account Number:** Credit Card Number
- **Expiration Date:** Credit Card Expiration Date

3. You will be taken to the Licensing Agreement. Review the agreement and click on "I Accept" to accept terms and proceed to the next screen

City and County of San Francisco

Controller's Office


Online Registration
Password and Contact Information

Organization Short Name: CCSF

User ID & Password

* = required

Please enter an ID between 7-20 alphanumeric characters and a password between 8-20 alphanumeric characters. Use a combination of letters and numbers easy for you to remember but not for others to guess.

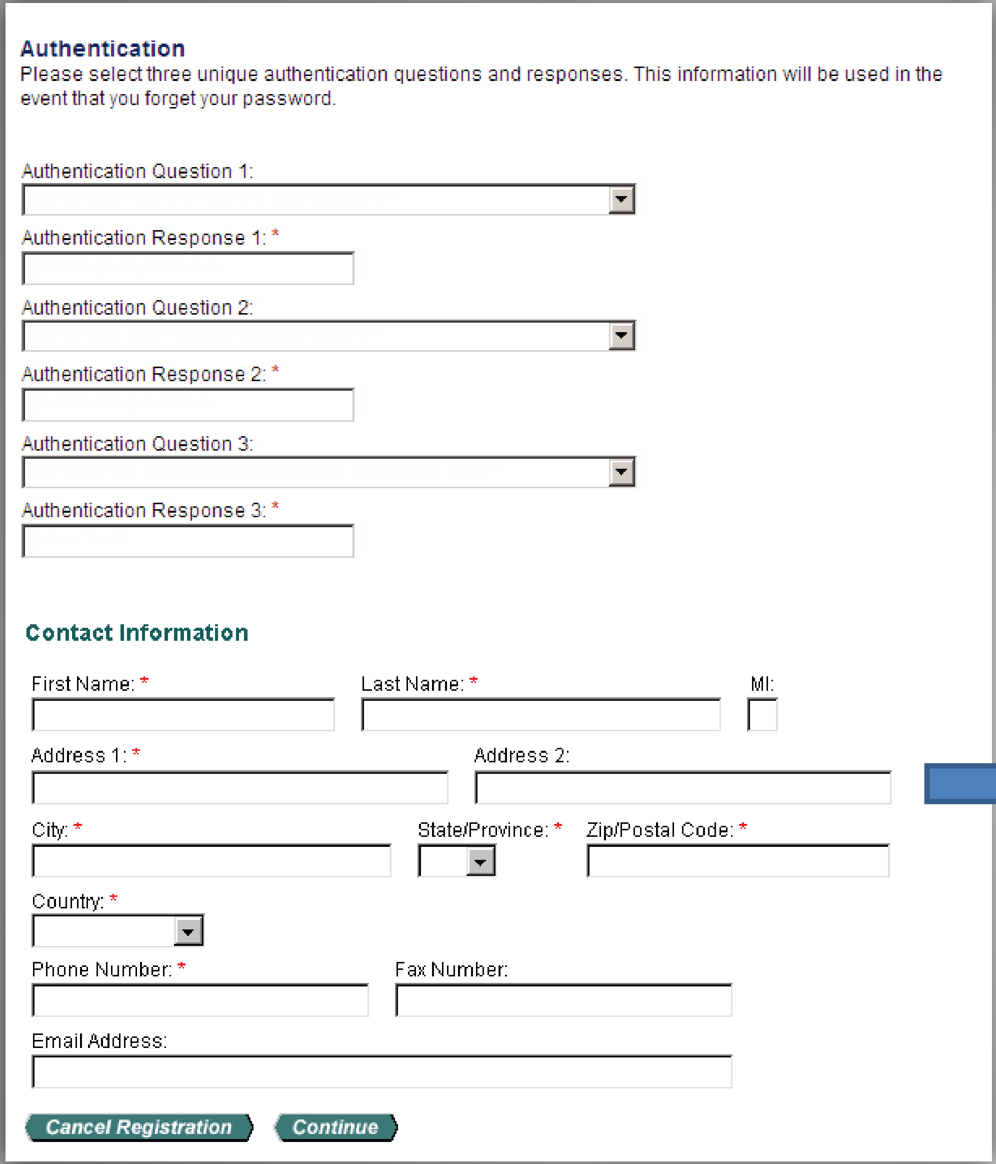
User ID: *

Password: *

Re-enter New Password: *

3. Create your own User ID and password

- User ID must be between 7-20 alphanumeric characters
  - E.G. "JohnDoe"
- Password must be between 8-20 alphanumeric characters, with at least one number, letter, and special character
  - E.G. "onetwothree123#"



Authentication

Please select three unique authentication questions and responses. This information will be used in the event that you forget your password.

Authentication Question 1:

Authentication Response 1: *

Authentication Question 2:

Authentication Response 2: *

Authentication Question 3:

Authentication Response 3: *

Contact Information

First Name: * Last Name: * MI:

Address 1: * Address 2:

City: * State/Province: * Zip/Postal Code: *

Country: *

Phone Number: * Fax Number:

Email Address:

Cancel Registration Continue

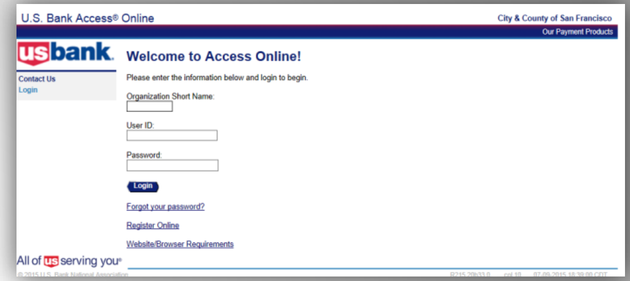
4. Fill out authentication questions. These may be used as verification elements when calling technical support.

5. **Fill out Contact Information with the SAME information you provided on the initial enrollment form.**

Access® Online

Coordinator/Billing Official Access

- Creating User ID
- Logging In
- Find and Print Account Statement
- Run Detailed Transaction Reports



U.S. Bank Access® Online

City & County of San Francisco

Our Payment Products

Contact Us
Login

Welcome to Access Online!

Please enter the information below and login to begin.

Organization Short Name:

User ID:

Password:

Login

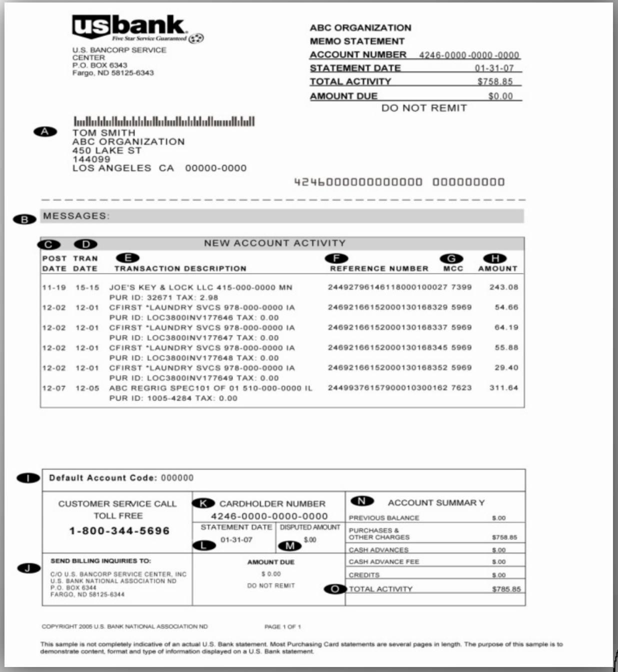
Forgot your password?

Register Online

Website/Browser Requirements

All of us serving you®

© 2015 U.S. Bank National Association R215.20b33.0 col 10 07-09-2015 18:39:00 CDT



Five Star Service Guaranteed

U.S. BANCORP SERVICE CENTER
P.O. BOX 6343
Fargo, ND 58125-6343

ABC ORGANIZATION
MEMO STATEMENT
ACCOUNT NUMBER 4246-0000-0000-0000
STATEMENT DATE 01-31-07
TOTAL ACTIVITY $758.85
AMOUNT DUE $0.00
DO NOT REMIT

A
TOM SMITH
ABC ORGANIZATION
450 LAKE ST
144099
LOS ANGELES CA 00000-0000

4246000000000000 000000000

B MESSAGES:

NEW ACCOUNT ACTIVITY

C POST DATE	D TRAN DATE	E TRANSACTION DESCRIPTION	F REFERENCE NUMBER	G MCC	H AMOUNT
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12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177646 TAX: 0.00	24692166152000130168329	5969	54.66
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177647 TAX: 0.00	24692166152000130168337	5969	64.19
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177648 TAX: 0.00	24692166152000130168345	5969	55.88
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177649 TAX: 0.00	24692166152000130168352	5969	29.40
12-07	12-05	ABC REGRIG SPEC101 OF 01 510-000-0000 IL PUR ID: 1005-4284 TAX: 0.00	24499376157900010300162	7623	311.64

I Default Account Code: 000000

CUSTOMER SERVICE CALL
TOLL FREE
1-800-344-5696

K CARDHOLDER NUMBER
4246-0000-0000-0000

STATEMENT DATE L 01-31-07
DISPUTED AMOUNT M $.00

N ACCOUNT SUMMARY

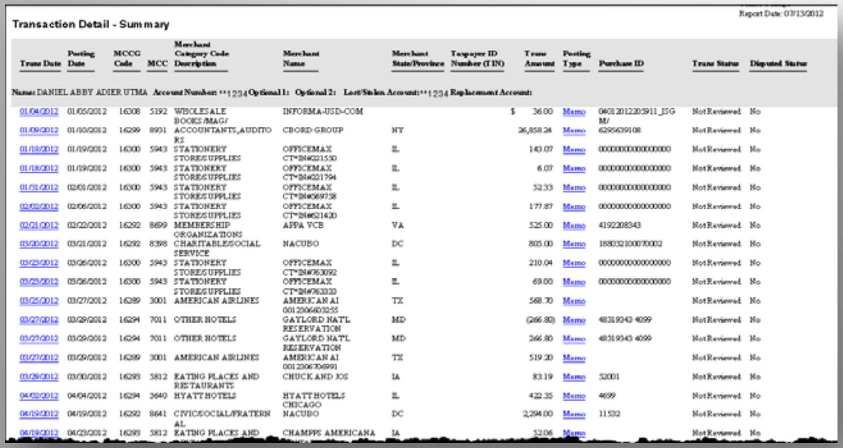
PREVIOUS BALANCE	$.00
PURCHASES & OTHER CHARGES	$758.85
CASH ADVANCES	$.00
CASH ADVANCE FEE	$.00
CREDITS	$.00
O TOTAL ACTIVITY	$785.85

J SEND BILLING INQUIRIES TO:
C/O U.S. BANCORP SERVICE CENTER, INC
U.S. BANK NATIONAL ASSOCIATION ND
P.O. BOX 6344
FARGO, ND 58125-6344

AMOUNT DUE
$ 0.00
DO NOT REMIT

COPYRIGHT 2005 U.S. BANK NATIONAL ASSOCIATION ND PAGE 1 OF 1

This sample is not completely indicative of an actual U.S. Bank statement. Most Purchasing Card statements are several pages in length. The purpose of this sample is to demonstrate content, format and type of information displayed on a U.S. Bank statement.



Transaction Detail - Summary

Report Date: 07/13/2012

Name: DANIEL ABBY ADIER UTMA Account Number: **1234 Optional 1: Optional 2: Lost/Stolen Account: **1234 Replacement Account:

Trans Date	Posting Date	MCCG Code	MCC	Merchant Category Code Description	Merchant Name	Merchant State/Province	Taxpayer ID Number (TIN)	Trans Amount	Posting Type	Purchase ID	Trans Status	Disputed Status
01/04/2012	01/05/2012	16308	5192	WHOLESALE BOOKS/MAG/	INFORMA-USD-COM			$ 36.00	Memo	04012012205911_JSG M/	Not Reviewed	No
01/09/2012	01/10/2012	16299	8931	ACCOUNTANTS,AUDITORS	CBORD GROUP	NY		26,858.24	Memo	6295639108	Not Reviewed	No
01/18/2012	01/19/2012	16300	5943	STATIONERY STORES/SUPPLIES	OFFICEMAX CT*IN#221550	IL		143.07	Memo	0000000000000000	Not Reviewed	No
01/18/2012	01/19/2012	16300	5943	STATIONERY STORES/SUPPLIES	OFFICEMAX CT*IN#221794	IL		6.07	Memo	0000000000000000	Not Reviewed	No
01/31/2012	02/01/2012	16300	5943	STATIONERY STORES/SUPPLIES	OFFICEMAX CT*IN#569758	IL		52.33	Memo	0000000000000000	Not Reviewed	No
02/02/2012	02/06/2012	16300	5943	STATIONERY STORES/SUPPLIES	OFFICEMAX CT*IN#621420	IL		177.87	Memo	0000000000000000	Not Reviewed	No
02/21/2012	02/22/2012	16292	8699	MEMBERSHIP ORGANIZATIONS	APPA VCB	VA		525.00	Memo	4192208343	Not Reviewed	No
03/20/2012	03/21/2012	16292	8398	CHARITABLE/SOCIAL SERVICE	NACUBO	DC		805.00	Memo	188032100070002	Not Reviewed	No
03/23/2012	03/26/2012	16300	5943	STATIONERY STORES/SUPPLIES	OFFICEMAX CT*IN#763092	IL		210.04	Memo	0000000000000000	Not Reviewed	No
03/23/2012	03/26/2012	16300	5943	STATIONERY STORES/SUPPLIES	OFFICEMAX CT*IN#763330	IL		69.00	Memo	0000000000000000	Not Reviewed	No
03/25/2012	03/27/2012	16289	3001	AMERICAN AIRLINES	AMERICAN AI 0012306603255	TX		568.70	Memo		Not Reviewed	No
03/27/2012	03/29/2012	16294	7011	OTHER HOTELS	GAYLORD NAT'L RESERVATION	MD		(266.80)	Memo	48319343 4099	Not Reviewed	No
03/27/2012	03/29/2012	16294	7011	OTHER HOTELS	GAYLORD NAT'L RESERVATION	MD		266.80	Memo	48319343 4099	Not Reviewed	No
03/27/2012	03/29/2012	16289	3001	AMERICAN AIRLINES	AMERICAN AI 0012306706991	TX		519.20	Memo		Not Reviewed	No
03/29/2012	03/30/2012	16293	5812	EATING PLACES AND RESTAURANTS	CHUCK AND JOS	IA		83.19	Memo	52001	Not Reviewed	No
04/02/2012	04/04/2012	16294	3640	HYATT HOTELS	HYATT HOTELS CHICAGO	IL		422.35	Memo	4699	Not Reviewed	No
04/19/2012	04/19/2012	16292	8641	CIVIC/SOCIAL/FRATERNAL	NACUBO	DC		2,294.00	Memo	11532	Not Reviewed	No
04/19/2012	04/23/2012	16293	5812	EATING PLACES AND	CHAMPPS AMERICANA	IA		52.06	Memo		Not Reviewed	No

Access Online User ID's for Approver/Billing Officials

User ID's are necessary to log into Access Online and are thus required for all Approvers and Billing Officials. This is the only way to obtain a copy of the Account Statement. Paper statements will not be mailed out.

Department Coordinator
Fill out template with required information and e-mail to P-Card Administrator

→

P-Card Administrator (CON)
Create User ID's and populate profile information with relevant info. Forward log-in info to Approver/Billing Official

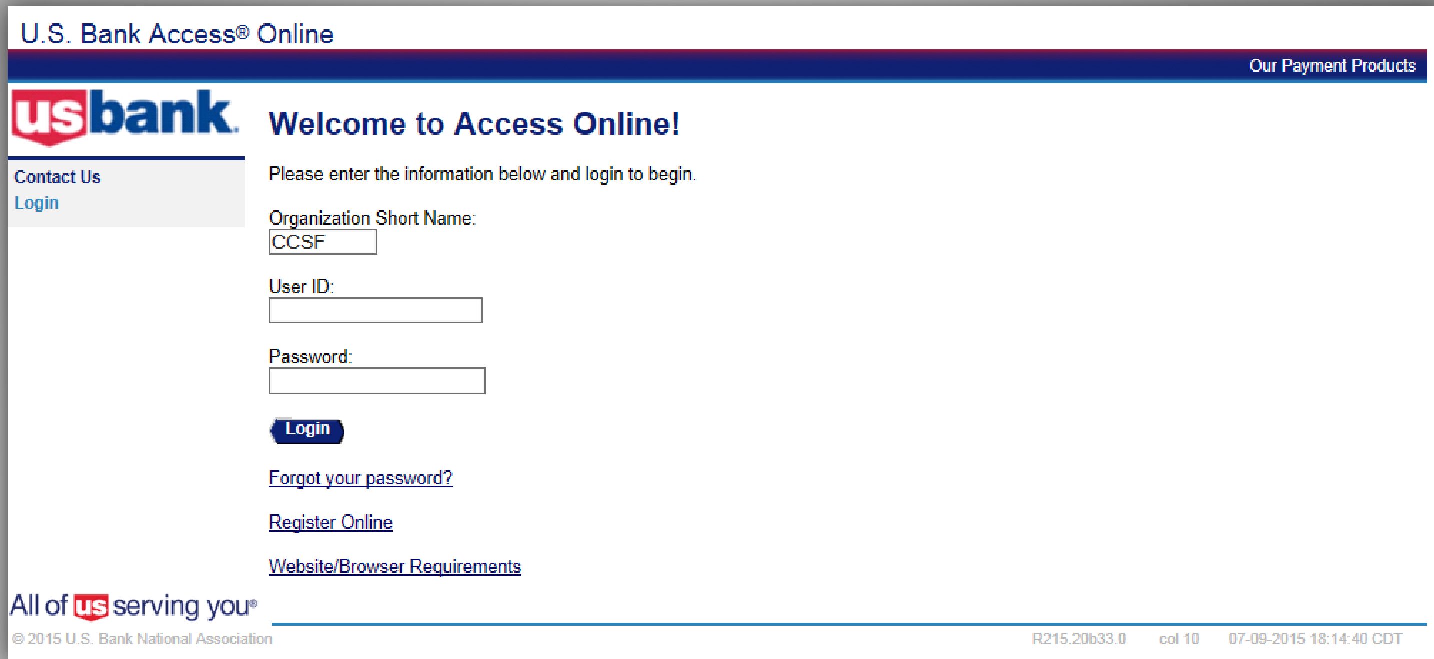
→

Approver/Billing Official
Sign in, change temporary password, and verify profile demographics

City and County of San Francisco

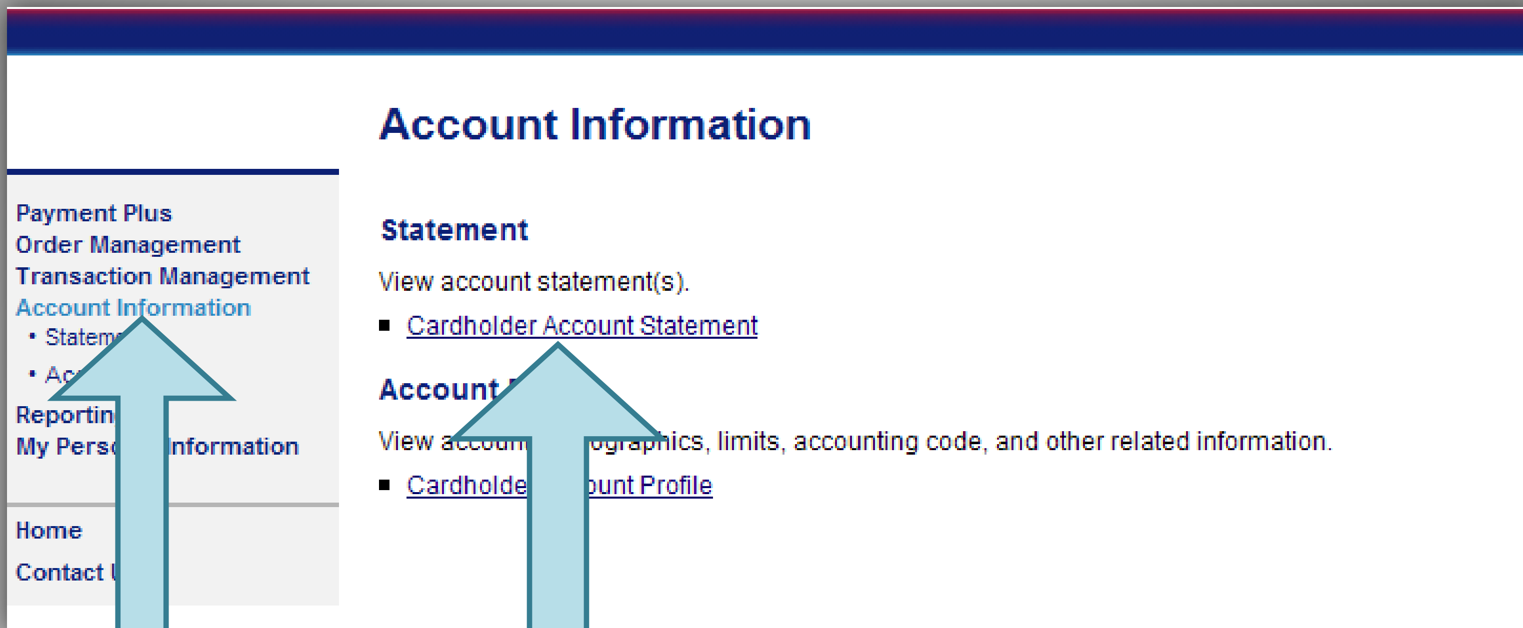
Controller's Office

Approver/Billing Officials Login



- **Organization Short Name**: CCSF
- **User ID**: Provided to you by P-Card Administrator when your account is created
- **Password**: Password you created upon registration

Cardholder Account Statement



1) Account Information

2) Cardholder Account Statement

- To access the statement, click on Account Information on the left navigational panel, and then "Cardholder Account Statement"

City and County of San Francisco

Controller's Office

Managing Account (Department) Statement

Cardholder Account Statement

Search & Select an Account

View Diversion Account | View Managing Account

Cardholder Account Search

Search for an account by Cardholder Account Number, Name, or Social Security Number. You can also find a cardholder account by first Searching for a Managing Account.

Account Number:

OR Last Name (or Vehicle Name): First Name:

OR Social Security Number:

Search

- Approvers and Billing Officials can search for the account statement by name. In the alternative, they may click on "view managing account" to see the statement for the entire department

- **Tip:** Put "%" in the Last Name field to bring up a list of all accessible accounts. The % acts as a "wildcard" search.

Account Information

Managing Account Statement

Managing Account Number: [redacted] Switch Accounts

Managing Account ID: [redacted]

To view a statement, select a cycle and click the "View Statement" button. **Please Note:** The statement cannot be used for remittance of payment; it is for display purposes only.

Select Billing Cycle:

07/27/2015

View Statement

- Choose the billing cycle of the statement you wish to view and click on "View Statement"

Sample Cardholder Account Statement

usbank
Five Star Service Guaranteed

U.S. BANCORP SERVICE CENTER
P.O. BOX 6343
Fargo, ND 58125-6343

ABC ORGANIZATION
MEMO STATEMENT

ACCOUNT NUMBER	4246-0000-0000-0000
STATEMENT DATE	01-31-07
TOTAL ACTIVITY	$758.85
AMOUNT DUE	$0.00

DO NOT REMIT

A
TOM SMITH
ABC ORGANIZATION
450 LAKE ST
144099
LOS ANGELES CA 00000-0000

4246000000000000 000000000

B MESSAGES:

NEW ACCOUNT ACTIVITY

C POST DATE	D TRAN DATE	E TRANSACTION DESCRIPTION	F REFERENCE NUMBER	G MCC	H AMOUNT
11-19	15-15	JOE'S KEY & LOCK LLC 415-000-0000 MN PUR ID: 32671 TAX: 2.98	24492796146118000100027	7399	243.08
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177646 TAX: 0.00	24692166152000130168329	5969	54.66
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177647 TAX: 0.00	24692166152000130168337	5969	64.19
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177648 TAX: 0.00	24692166152000130168345	5969	55.88
12-02	12-01	CFIRST *LAUNDRY SVCS 978-000-0000 IA PUR ID: LOC3800INV177649 TAX: 0.00	24692166152000130168352	5969	29.40
12-07	12-05	ABC REGRIG SPEC101 OF 01 510-000-0000 IL PUR ID: 1005-4284 TAX: 0.00	24499376157900010300162	7623	311.64

I **Default Account Code:** 000000

CUSTOMER SERVICE CALL
TOLL FREE
1-800-344-5696

K CARDHOLDER NUMBER
4246-0000-0000-0000

L STATEMENT DATE	M DISPUTED AMOUNT
01-31-07	$.00

N ACCOUNT SUMMAR Y

PREVIOUS BALANCE	$.00
PURCHASES & OTHER CHARGES	$758.85
CASH ADVANCES	$.00
CASH ADVANCE FEE	$.00
CREDITS	$.00
O TOTAL ACTIVITY	$785.85

J **SEND BILLING INQUIRIES TO:**

C/O U.S. BANCORP SERVICE CENTER, INC
U.S. BANK NATIONAL ASSOCIATION ND
P.O. BOX 6344
FARGO, ND 58125-6344

AMOUNT DUE
$ 0.00
DO NOT REMIT

PAGE 1 OF 1

This sample is not completely indicative of an actual U.S. Bank statement. Most Purchasing Card statements are several pages in length. The purpose of this sample is to demonstrate content, format and type of information displayed on a U.S. Bank statement.

(A) CARDHOLDER: Your name as it appears on your card, along with your agency/organization name and office address

(C) POST DATE: The date U.S. Bank received, processed and posted the transaction posted to the account

(D) TRAN DATE: The date of your purchase. This date should match the date on the sales receipt provided by the merchant

(E) TRANSACTION DESCRIPTION: The merchant's name, city and state

(H) AMOUNT: The amount of each purchase as shown on your copy of the sales draft

(K) CARDHOLDER ACCOUNT NUMBER: The 16-digit account number on your card or account

(L) STATEMENT DATE: The date your Cardholder Statement of Account is issued and sent to you

(N) ACCOUNT SUMMARY: Summary of account activity by charge category

(O) TOTAL ACTIVITY: Total balance of purchases and other charges, fees and credits since last statement date

Sample Managing Account Statement

usbank

P.O. BOX 6343
FARGO ND 58125-6343

ACCOUNT NUMBER	[redacted]
STATEMENT DATE	07-27-2015
AMOUNT DUE	$7.00
NEW BALANCE	$7.00

PAYMENT DUE ON RECEIPT

AMOUNT ENCLOSED
$

Please make check payable to "U.S. Bank"

000000934 1 SP 106481132824923 S
CCSF-CITY ATTORNEY
ATTN JOCELYN QUINTOS
CITY HALL, ROOM 300
1 DR CARLTON B GOODLETT PL
SAN FRANCISCO CA 94102-4603

U.S. BANK CORPORATE PAYMENT SYSTEMS
P.O. BOX 790428
ST. LOUIS, MO 63179-0428

[redacted] 000000700 000000700

Please tear payment coupon at perforation.

CORPORATE ACCOUNT SUMMARY

CCSF-CITY ATTORNEY [redacted]	Previous Balance	+ Purchases And Other Charges	+ Cash Advances	+ Cash Advance Fees	+ Late Payment Charges	- Credits	- Payments	= New Balance
Company Total	$0.00	$7.00	$0.00	$.00	$0.00	$0.00	$0.00	$7.00

NEW ACTIVITY

[redacted]

CREDITS	PURCHASES	CASH ADV	TOTAL ACTIVITY
$0.00	$7.00	$0.00	$7.00

Post Date	Tran Date	Reference Number	Transaction Description	Amount
07-10	07-08	24431065190002190649176	SUPERIOR COURT OF ALAMED 510-891-6288 CA	7.00

Department: 00003 Total: $7.00
Division: 00000 Total: $7.00

CUSTOMER SERVICE CALL

800-344-5696

ACCOUNT NUMBER

[redacted]

STATEMENT DATE	DISPUTED AMOUNT
07/27/15	.00

SEND BILLING INQUIRIES TO:

U.S. Bank National Association
C/O U.S. Bancorp Purchasing Card Program
P.O. Box 6335
Fargo, ND 58125-6335

AMOUNT DUE

7.00

ACCOUNT SUMMARY

PREVIOUS BALANCE	.00
PURCHASES & OTHER CHARGES	7.00
CASH ADVANCES	.00
CASH ADVANCE FEES	.00
LATE PAYMENT CHARGES	.00
CREDITS	.00
PAYMENTS	.00
PAYMENTS	.00
ACCOUNT BALANCE	7.00

- Department approvers and billing officials can view managing account (depart-wide) statement as well as each individual cardholder account statement.
- The managing account statement displays balance of the entire department and activities on each card.

Access Online Training

- **AccessOnline Web-based Training**

  https://access.usbank.com

  - Log in and click on "training" on the navigation panel

- **Passwords***

  Cardholder = zinder

  Program Administrator = nevada

*** Note that passwords change approximately every 60 days.**

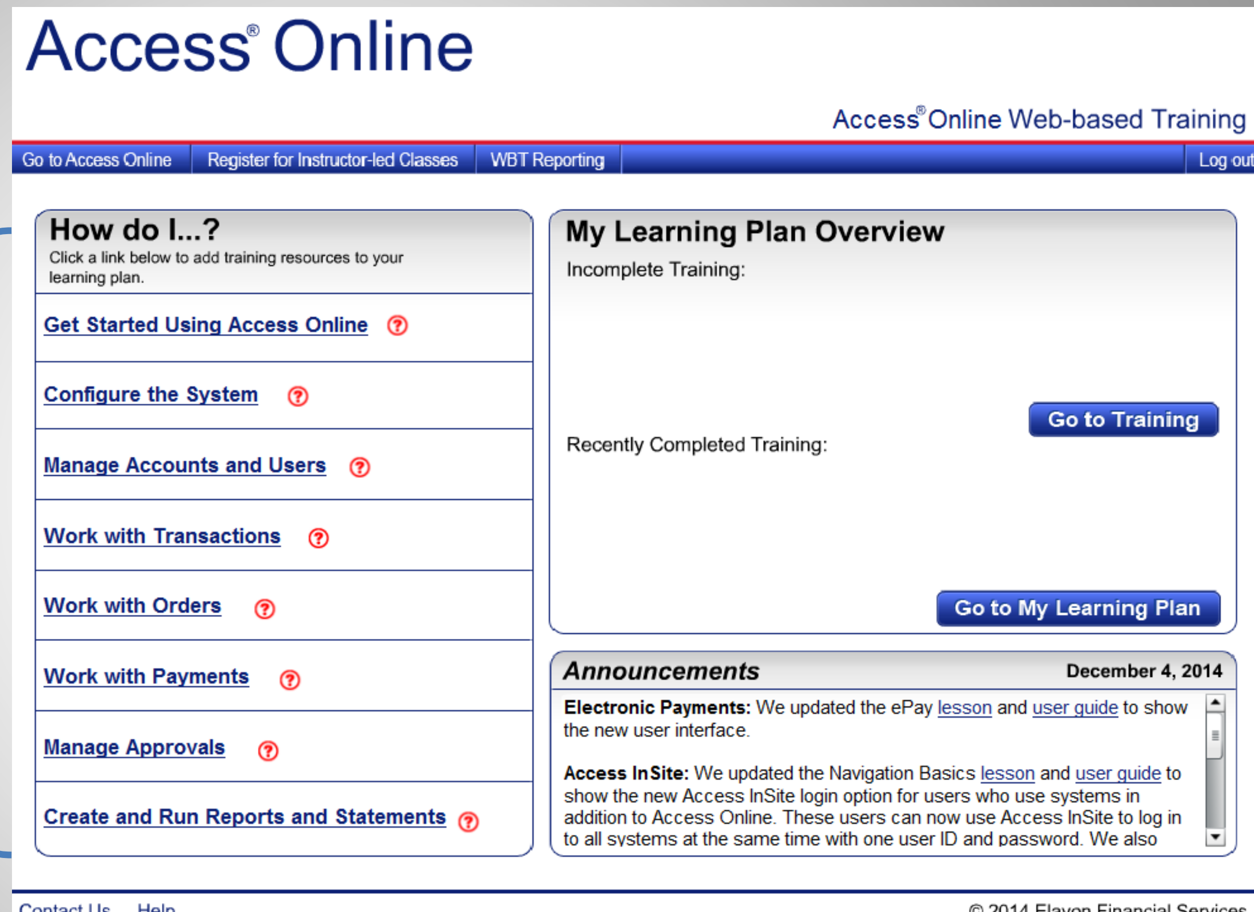
City and County of San Francisco

Controller's Office

Access Online Training

Access Online Training

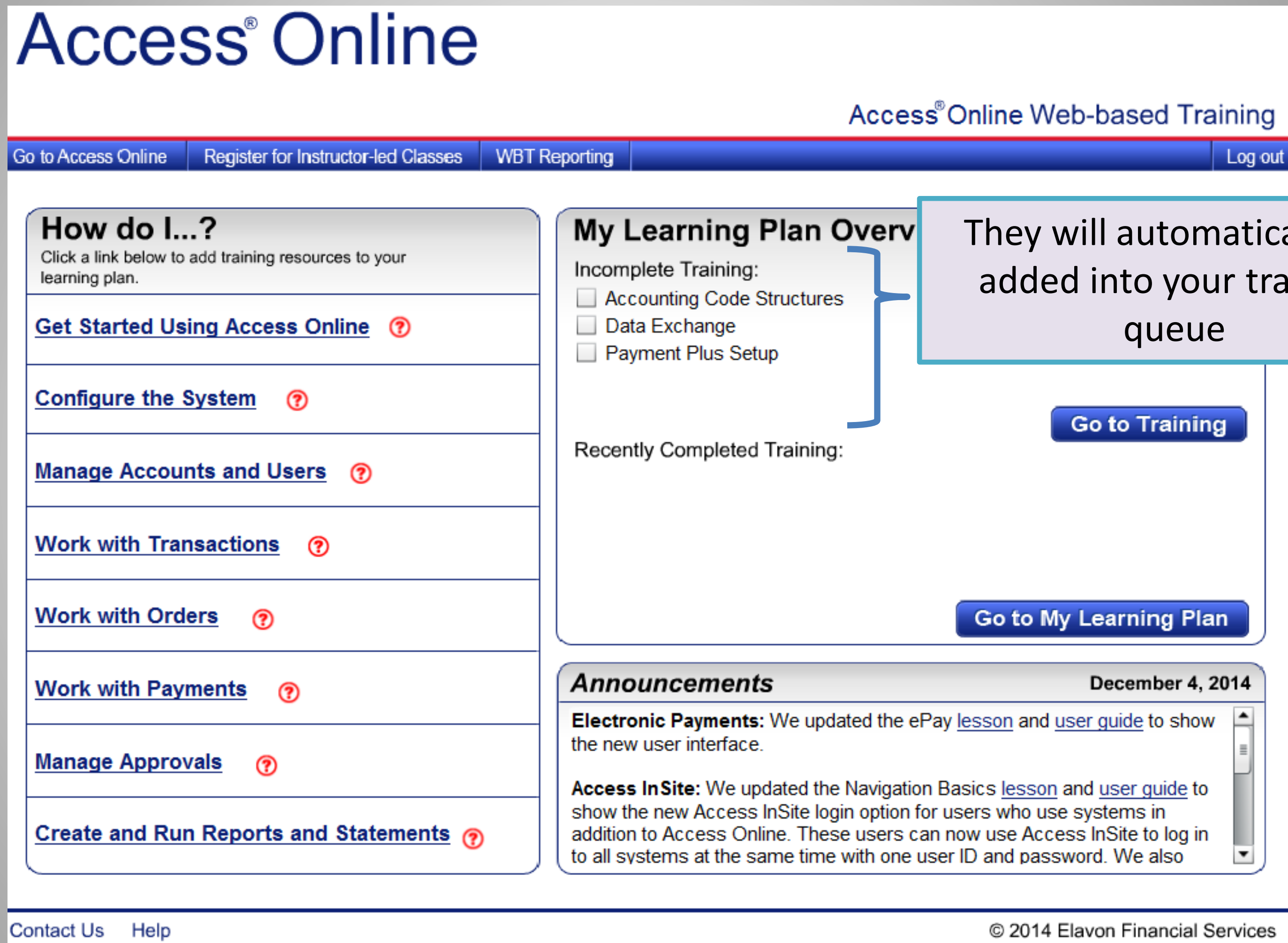
Click on one of the "How Do I…?" links to add lessons to your learning plan



City and County of San Francisco

Controller's Office

Access Online Training



They will automatically be added into your training queue

City and County of San Francisco

Controller's Office

Questions?