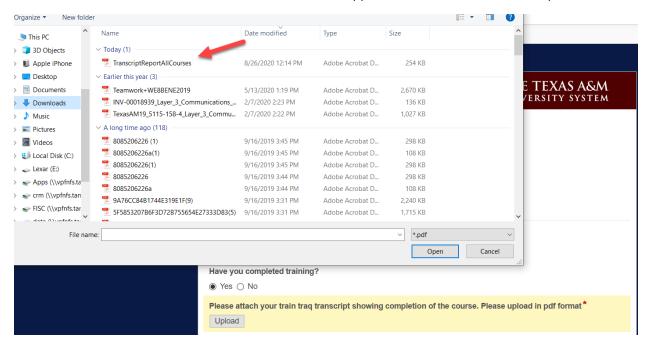
Payment and Travel Card Application Guide

Link to application: <u>https://it-lf-ecmf.tamu.edu/Forms/Payment-Travel-Card-Application</u>

Select your system member and then the type of card to be ordered. Then answer if you have completed training. If you have completed the training it will require you to upload your transcript. If you have not completed training you can answer no and submit the application, but the card will not be ordered until the training is completed.

Payment Travel Card Application	THE TEXAS A&M UNIVERSITY SYSTEM
Agency Name * Texas A&M University ~	
Application Type * Payment Card Travel Card DART Travel Card Cardholder Information	
Card Type [★] ● Individual ○ Departmental	
Have you completed training? Yes No	
Please attach your train traq transcript showing completion of the course. Upload	Please upload in pdf format *

First login to TrainTraq through SSO and navigate to "My Transcript". Then download the transcript so it can be added as an attachment. Click on browse in the application and select the file to upload.



After attaching the transcript, then enter the cardholders name, address, department code, and contact information. The department code field is search as you type. So you can type in your member number, space and department code. Phone number must be entered as shown below.

Upload			
TranscriptReportAllCourses.pdf		:	253.31KB
First Name*	Middle Initial		Last Name *
Clint			Merritt
Card Billing Address* (?)			
Street Address			
750 Agronomy Rd Suite 3101			
Address Line 2			
6000 TAMU			
City		State / Province / F	Region
College Station		ТХ	
Postal / Zip Code		Country	
77843		USA	
Dept. Code *			
02 FISC v			
Phone No.*	Email*		UIN* (?)
9798458772	c-merritt@tamu.ed	u	501005527
Please enter in format:xxxxxxxxxxx			No hyphens needed.

The card limits will auto populate when the system member is selected. Each member may have a different default monthly or single transaction limit. You can edit the fields to request more or less in the monthly transaction limit. However the Single Transaction limit cannot be increased, only decreased in the request. Complete the department contact information and then determine if the payment card needs to be assigned to a card administrator in Concur. If you do assign it to a card administrator in Concur the transactions for this card will not appear in the cardholder's profile, but in the user's profile noted below. Then click Submit.

\bigcirc	Card	Li	mits
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Monthly Transaction Limit*	Single Transaction Limit* \$ 10,000.00	
Department Contact Infor		
First Name [*]	Last Name *	UIN*
Evonne	Crocker	701008781
		No hyphens needed.
Email*	Phone No.*	
ecrocker@tamu.edu	9798451373	
	Please enter in format:xxxxxxxxxxx	
	Please enter in format:xxxxxxxxxx	

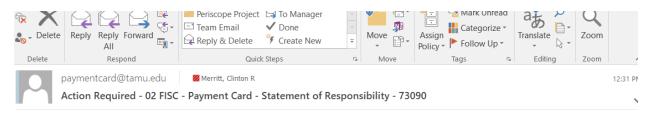
○ Yes ● No

Submit

Getting Started			
l⊋	Thank you!		
	Your Payment Card form has been submitted. Please click h	ere to submit another new request.	
	Print		
	Description of Trend Court Application	THE TEXAS A&M	
	Payment Travel Card Application	UNIVERSITY SYSTEM	
	Agency Name* Texas A&M University		
	Application Type *		
	Payment Card Travel Card DART Travel Card		
	Cardholder Information		
	Card Type*		
	Have you completed training?		
	Yes O No		

You will get a confirmation that the application has been submitted.

The applicant (future cardholder) will receive an email to sign the statement of responsibility agreement. Click on the link in the email.



A Payment Card request has been submitted for you.

A signed Statement of Responsibility is required to process your request.

Please click Statement of Responsibility agreement. The card will not be ordered until this statement is acknowledged/signed.

This is an automated email. Please do not reply.

I

The applicant will then read agreement and then sign the form.

Payment Tra	vel Card Application	THE TEXAS A&M UNIVERSITY SYSTEM
Instance ID	73090	
Individual Paym	ent Card	
As the card cardholde Program Guide.	er, I agree to comply with the terms and conditions	of this Agreement and the Payment Card
Program Guide. I also a	ve read and understand the terms and conditions of acknowledge that I have completed the Individual a s A&M University (hereinafter called Member) is lial	and Departmental Payment Card Online Training.
that the Individual Payr times per year a depart	for Member approved purchases only and agree in nent Card is limited in regards to card sharing and imental card should be requested. Furthermore, if t t/In Log. I understand the use of this card will be re lepartmental approver.	that if the card needs to be shared more than 12 the card is shared I agree to document sharing
	t improper use of this card may result in disciplinal repay the Member any amounts owed by me ever	
	ard is property of the Member. I further understand r any reason. I agree to return the card to the Mem nent.	
Name	Clint Merritt	
Dept. Code	02 FISC	
UIN	501005527	
	No hyphens needed.	
Signature *	Sign	_
Submit		

Sign Document	×
Type Draw	
Clint Merritt	Style 🗸
CLINT MEPPI	TT
	Sign Cancel

The applicant will type in their name in the below, select the style of signature and then click sign.

After signing just click submit.

departmental head or departmental approver.

I further understand that improper use of this card may result in disciplinary action, which may include termination of employment. I agree to repay the Member any amounts owed by me even if I am no longer employed by the Member.

I understand that the card is property of the Member. I further understand that the Member may terminate my right to use this card at any time for any reason. I agree to return the card to the Member immediately upon request or upon termination of employment.

Name	Clint Merritt	
Dept. Code	02 FISC	
UIN	501005527 No hyphens needed.	
Signature *	CLINT MEPPITT	×
Submit	-	

The application is routing to the approvers at the same time it sent the statement of responsibility to the applicant. The approver will receive an email requesting review and approval of the application. Click on the link "Click here to open this task in Laserfiche Forms". This link will direct the approver to login with their Net Id and password.

Wed 8/26/2020 12:31 PM paymentcard@tamu.edu 02 FISC - Payment Card Approval - 73090 To Chargois, BridgettD; ■ Phair, Deborah L

A Payment Card request has been submitted for 02 FISC.

Please review the form using the link below. Once assigned to yourself, you can submit for further approval or reject the form.

6

You will need to log in using your NetID.

If you cannot remember your NetID or password, it can be retrieved at https://gateway.tamu.edu

Click here to open this task in Laserfiche Forms

This is an automated email. Please do not reply.

Once the approver has logged in click on "Unassigned Tasks" and then click on the wording in blue to open the form.

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Once you open the form click on the "Assign" button in green in the top right of the screen. The first approval step has the ability to edit the fields in the form.

Department Creator Review						Sever de att
			inter and international			* Department Creator Review 73000 RVO - Rymers Travel Cerd Application: Anonym
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	Application Type* © Payment Card () Travel Card	O DART Travel Card				Priority None Team No team
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	Carit Type" individual ::: Departmental	D	é.			
	Please attach your train tract trai Upload TranscriptReport2/Courses pdf	nacript showing completion of th	he course. Please upload in pdf	format"		
	First Name*	Michtle Initial	Last Name*	<u></u>		
	Card		Merrit			
	Card Billing Address* (1)					
	750 Agronomy Rd Suite 3101					
	Administration 1					
	Topos totals	State Prote				
	College Station	TX				
	Parist / Za Dain-	Earth				
	77843	US4				
	Dept. Code*					
	Phone No.*	"Erust"	UN*	_		
	9796450772	c-mentli@tanui.edu	501005527			
	Card Limits		No fugitive contain			
	Monthly Transaction Limit* 5	Single Transaction Limit*				
	2,500.00	10.000.00				
	Department Contact Info					
	First Name*	Last Name*	UN*			
	Evonne	Crodier	701008731			
	Email*	Phone No."				
	ecrocker@tamu edu	(9790451373 Pasar energia locationeses				
	Does card need to be assigned in O The . Fig.	in Concur to someone other than	n the Cardholder?*			
	Comments					
						0 1246 PM

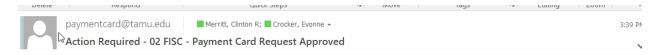
The second approval step, which is the department signer step, does not have the ability to edit the form. However if edits are needed they can return the form back to the first approver step to be modified by selecting "Send back for Modification(s)". The document can also be approved or rejected at the bottom of the form in both approval steps.

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				Task Information
	Agency Name* Texas AMM University			Assigned to Phair, Deborah L (Entroligo) Date assigned 1.06 PM
	Application Type*			Due date: No due date Priority: None
	Payment Card Travel Card Gardholder Information			Team Sistem
	Card Type*			
	⊕ Individual ⊂ Departmental	C.	2	
	Have you completed training?			
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	First Name"	Middle Initial	Last Name"	
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	Ammentine 7 BOOD TAMU			
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	02 FISC Phone No.*	Email*	UN"	
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	Card Limits	12496 5 504		
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	First Name*	Last Name" Cricker	UIN " 701008781	
	Email*	Phone No.*	No. Applicant extension	
	ectocher@tama edu	9796451373		
	Does card need to be assigned	in Concer to someone other th	han the Cardholder?*	
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Once the department signer approves the form (assuming the cardholder has completed training) the form will be available in the Back Office Review step for the approval of the application. The back office then clicks assign, reviews the form, edit if necessary and then approve at the bottom of the form. If necessary the form can also be rejected.

		της τελάς νένα	* Back Office Review 73090 PMO - Peyment Travel Card Application: An User	ranymous
Payment Travel Ca	rd Application	THE TEXAS A&M UNIVERSITY SYSTEM	Summary Action History	
Agency Name*			8/26/2020 1:12 PM Crocker, Evonne, Groce, Tiffany L & Ar Crystal L are in process with task	rtis,
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Payment Card O Travel Card	DART Travel Card		Phair, Deborah L completed task	
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Individual Departmental			B/26/2020 12:48 PM Phair, Deborah L completed task	
Have you completed training?			Department, Creator, Review	
🗑 Yes 🔘 No			✓ Approve	
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First Name*	Middle Initial	Last Name*	process FMO - Payment Travel Card Application	
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Card Billing Address*(7)				
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College Station	TX			
Postal / Zip Code	Country			
77843	USA			
Dept. Code*				
02 FISC V				
Phone No.*	Email*	UIN*		
9798458772	c-merritti@tamu.edu	501005527		

Once approved by the back office the applicant/cardholder and department contact will receive an email notification letting them know the card has been ordered. There is a link to the cardholder checklist to provide information on activating the card and some guidelines on its usage. The cardholder should hold on to this email until the card is received so they can acknowledge receipt of the card by click on the link show below in the email. The cardholder will be reminded to acknowledge receipt of the card after 10 days and will receive an email daily until the receipt of the card is acknowledged. The acknowledgement completes the process.



Your Payment Card request has been approved. The card has been ordered with an expected delivery of 5-7 business days.

Upon receipt of the card, please immediately activate the card for use. Instructions for activating the card, the cardholder responsibilities or contact information for the Travel/Payment Card office, please see the <u>Payment Cardholder Checklist</u>

In addition, please click here to acknowledge receipt of card.

This is an automated email. Please do not reply.

If choosing Travel Card or Dart Card the process is exactly the same. However on the form there are some fields that may vary depending on if Travel or Dart Card is selected. Below is the Travel Card form.

Agency Name*				
Texas A&M University		\sim		
Application Type [★] ○ Payment) DART Travel Card			
Cardholder Information				
First Name *	Middle Initial		Last Name *	
Card Billing Address* (?)				
Street Address				7
Address Line 2				
City		State / Province / R	legion	
		ТΧ		
Postal / Zip Code		Country		
		USA		
Dept. Code *				
Phone No.*	Email*		UIN * (?)	
Please enter in format:xxxxxxxxxxxxxx			No hyphens needed.	
Card Limits			in application incoded.	

The top half of the form is very similar except it does not have a training question/requirement. The bottom half of the form does not have a single transaction limit nor the option for assigning the card to card administrator. Travel cards and their transactions have to be in the employees/cardholder's profile.

Card Limits							
Monthly Transaction Limit* \$ 2,500.00							
Department Contact Information							
First Name*	Last Name *	UIN *					
Email *	Phone No. *	no nypricio needed.					
Submit	Please enter in format:xxxxxxxxxx						

Dart card form is the same, except it is possible to assign a dart card to an employee/card administrator. In the event the dart card is for a student or other non-employee it has to be assigned to an employee. In the event it is not an employee the UIN hover help provides the UIN number to use. If it is an employee then it should be the employees UIN that is used and the card should not be assigned to another employee.

Ap Vication Type*						
Cardholder Information						
First Name*	Middle Initial	Last Name*				
Card Billing Address* (?)						
Street Address						
Address Line 2						
City	State / Province /	Region				
	TX					
Postal / Zip Code	Country					
	USA					
Dept. Code*						
~						
Phone No.*	Email*	UIN* (?)				
Please enter in format:xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx		No hyphens needed.				
Card Limits						
M						
Monthly Transaction Limit* \$						
2,500.00						
Department Contact Information						
First Name*	Last Name*	UIN*				
		No hyphens needed.				
Email*	Phone No.*					
	Please enter in format:x000000000					
Does card need to be assigned in Concur to someone other than the Cardholder?* (?)						
Submit						