Department of Veterans Affairs

STATEMENT OF UNDERSTANDING FOR THE GOVERNMENT TRAVEL CHARGE CARD PROGRAM

I understand the Government Travel Charge Card Program is designed to improve the management and control of Government travel and thereby promote the efficiency of the Federal Service. I also understand I am authorized to use the Travel Card only for those necessary and reasonable expenses incurred by me for official travel. I will abide by these instructions issued by the Department of Veterans Affairs (VA). The above limitation on Travel Card use also applies to automatic teller machine (ATM) withdrawals. The amount of cash withdrawals may not exceed the allowable per diem amounts. I will, however, charge expenses to the account wherever feasible rather than use cash withdrawals. I understand the issuance of this Travel Card to me is an extension of the employee-employer relationship, and I am being specifically directed to:
(Card applicants must initial all the following provisions.)

_____ Abide by all rules and regulations with respect to the Travel Card Program.

_____ Use the Travel Card only for official travel.

_____ Not use my Travel Card to make ATM withdrawals unless authorized in accordance with VA Travel Card Policy.

_____ Use the **mandatory** split disbursement feature on the VA travel system expense voucher for the total authorized charges made to the Travel Card.

_____ Pay outstanding balance **in full** identified on the monthly billing statement from the Travel Card Contractor Bank by due date. Balance is due even if expense voucher has not been submitted.

_____ Notify the A/OPC of any problems with respect to my use of the Travel Card.

_____ File a dispute with the bank in a timely manner (within 90 days of charge per contract) for unauthorized charges.

_____ Notify the Card Contractor (bank) and my A/OPC if my Travel Card is lost or stolen

_____ Notify the Card Contractor (bank) if my address changes.

I also understand failure on my part to abide by these rules or other misuse of the Travel Card may result in disciplinary and or administrative action being taken against me. I also acknowledge the right of the Travel Card Contractor Bank and/or A/OPC to revoke or suspend my Travel Card privileges if I fail to abide by the terms of this agreement or the agreement I have signed with the Travel Card Contractor Bank.

Note. *The Travel Card application cannot be processed without this form on file.*

APPLICANT'S SIGNATURE	DATE
APPLICANT'S PRINTED NAME	APPLICANT'S TITLE
SUPERVISOR'S SIGNATURE	DATE
SUPERVISOR'S PRINTED NAME	SUPERVISOR'S TITLE
A/OPC'S SIGNATURE	DATE
A/OPC'S PRINTED NAME	A/OPC'S TITLE