

VISA PROCUREMENT CARD DEPARTMENT USER'S GUIDE

*updated 2/2017

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Upstate Purchasing VISA PROCUREMENT CARD

HIGHLIGHTS OF THE PROCUREMENT CARD PROGRAM:

- Cannot be used for Travel
- To be used for purchases on STATE accounts only
- Receive your items more timely than under traditional procurement process
- Cost effectiveness when paying by credit card versus state check. According to a recent study by the National Association of State Comptrollers (NASC), savings related to procurement card use ranges from \$24 to \$75 per transaction. A similar study conducted by a commercial procurement card vendor estimates it costs \$67 to process a voucher compared to \$11 with a procurement card — a savings of \$56 per transaction. Using the lowest reported savings estimate, \$24 per transaction, the University saved approximately \$2.3 million in the 2004/05 fiscal year.

IMPORTANT DETAILS:

- Don't lend your Procurement Card or give the number to anyone. Know where your card is. Keep it in a secure place.
- Goods/services are received at central receiving, not the cardholders home address.
- Do not share any passwords related to your card or the online certification.
- Check to see that your budget account has sufficient funds to cover your purchases.
- An individual transaction cannot exceed \$2500. Do not split order.
- Report lost or stolen cards immediately to Citibank Visa and your Program Administrator.
- All card holders must be authorized on self serve to make purchases.
<https://selfserve.upstate.edu/ais/applications/purchasing/authorizations/admin/index.cfm>
- If a card is inactive for 1 year, it will be turned off.

FOR ASSISTANCE WITH:

- Applying for a new card
- Reconciliation Training
- Vendors to purchase from
- Unallowable charges
- Credit Card Discrepancies

Contact: Program Administrator Heather Lindsay at lindsayh@upstate.edu, 4-4598, or Campus Purchasing 4-5720.

VISA CARD

How to activate card-

Please follow the instructions sticker on the front of your credit card. Your card is not active for purchases until this is complete.

Once you activate your card, you can begin to make purchases.

How to Create your Citibank Profile-

Please complete this step to allow access to download and print your monthly statement. This website will not be used for the actual reconciliation. **If you have issues with your username or password, you will need to contact Citibank direct @ 1-888-836-5011 option 1 then option 2 . The Program Administrator does not have access to this website.**

Create Your Citibank Online User account-

Go to:

<https://home.cards.citidirect.com>

This will bring you to the Citi Commercial Cards System. .

FIRST TIME USERS:

Click on the link "Self Registration for Cardholders".

Click on "Fill in the card data" option.

Enter your 16-digit card number with no spaces or dashes.

Enter your name as it appears on the card – if you use a middle initial, please do not use punctuation after that initial. PLEASE USE ALL CAPS FOR YOUR NAME.

Address information: **750 East Adams St** **Town = Syracuse** **Zip = 13210**

NOTE: If you are not sure of the address, please send me an email and I will verify it for you. The address must match what I have entered into the application module.

Hit CONTINUE.

On the second screen you will be asked to create a username and password.

On the bottom of the screen, you will be asked to answer a Helpdesk Verification question. Please enter your last 4 digits of your social security #. If you need to call the Citibank helpdesk for anything, you will need to supply them with this information.

Hit CONTINUE. Confirm the details and hit CONFIRM. Then click OK.

You should be self registered now. If you are still having problems, call the Citibank Online Support Help Desk at 1-888-836-5011, choose option 1 then option 2. You will be able to talk to a customer service representative.

How to make purchases:

1) **Locate item your are purchasing-** You are encouraged when possible to utilize:

1st: Preferred Source Vendors: <http://www.corcraft.org/> www.nyspsp.org <http://www.nysid.org/>

2nd: NYS Contracts (<http://www.ogs.ny.gov/Purchase/Search/default.asp>)

3rd: Discretionary spend- Minority/Women Vendors:

<https://ny.newnycontracts.com/FrontEnd/VendorSearchPublic.asp?TN=ny&XID=4687>

****Please keep a record of price reasonableness to justify vendor if not using one of the above sources. Include all vendor quotes as backup. – (contact appropriate Purchase Associate at ext 5720 if you need assistance)****

2) ORDER Online/ Phone in- Verify that vendor accepts VISA payment. For best practices, please use your credit card over a secure website, or by phone with the company. Emailing of credit card information is not an acceptable method.

3) NYS is tax exempt. When making purchases, verify that tax is not included. Our tax exempt # is: 14740026K. A tax exempt form is included with your packet should a vendor request one. A separate tax exempt form will need to be used for each vendor that request one. If you do receive a tax charge, a confirmation of reimbursement MUST be included in your reconciled packet. When the tax credit appears on the next month's statement, a copy of the original paperwork must be attached.

4) Amazon Orders- For purchases that are not available with Preferred Source, NYS Contract, or Minority/Women Vendors, and placed with Amazon, the tax will need to be removed. To set up your account for tax exempt please follow the instructions below-

1) Go to your Amazon account settings-click on Amazon Tax Exemption Program to upload your tax exempt form for the current fiscal year. (Example form below) For a fillable Exempt form go to: http://www.osc.state.ny.us/Agencies/forms/ac946_f.pdf

2) Place order with Amazon (please use Amazon.com as seller versus Marketplace resellers- using Marketplace resellers require a different method to recover the tax cost)

3) Amazon will only address the credit for tax AFTER the shipment has been made. Once you have received confirmation that your item has shipped, contact Amazon by email: tax-exempt@amazon.com **Subject line:** tax exempt purchase. **In Email:** "Please credit my VISA account \$ x.xx for tax charged against order number# (17 digits in this format: XXX-XXXXXXX-XXXXXX). My tax exempt information is on file."

4) Amazon will email you stating they have credited the account. If Amazon uses a reseller to ship the product they will let you know that the tax request will need to be made to the seller directly and not Amazon.com. Amazon will give you the contact information for the reseller.

5) Verify on your statement that Amazon has credited the tax back. (Note: We have 60 days from the date of the original Citibank statement to dispute charges.)

How to Receive Goods: When placing your order, please have the vendor put on the shipping label & packing slip: **VISA**. This can be included as part of the ship to address for Example:

SUNY UPSTATE MEDICAL UNIV.
Receiving Dept
117 Monroe St
VISA-H. Lindsay SLC 2043
Syracuse, NY 13210

How to Reconcile:

Reconciling charges- Each cardholder will be responsible for reconciling their card promptly each month. Included in this guide are detailed instructions for reconciling. A reconciliation email will be sent around the 10th of each month from the Program Administrator. This email will contain the billing cycle date you must use to reconcile your charges as well as the deadline date for your reconciliation. You will need to print out your Citibank statement every month for your records and for submission with your packets to the Program Administrator. PLEASE NOTE: **Your Citibank monthly statement will need to be reviewed and signed by your Supervisor. Please send the original signed statement with your packet for submission.**

How to report a lost/stolen Card:

CARDHOLDERS RESPONSIBILITY

Any lost or stolen Purchasing Cards must be reported immediately to CITIBANK VISA, 1-800-248-4553. The cardholder should be prepared to give their name exactly as it appears on the face of the card, the account number, the card's expiration date, and a brief explanation surrounding the loss. Cardholders must promptly report lost or stolen account numbers and cards to Citibank and also call and email the Program Administrator:

Richard Litz
Director Hospital Purchasing
litze@upstate.edu
315-464-2403 or 315-464-6039

Heather Lindsay
Purchase Associate
lindsayh@upstate.edu
315-464-5720 or 315-464-4598

The Customer Service Center is staffed 24 hours a day, 7 days a week, every day of the year to accept calls from Cardholders reporting lost or stolen cards. Subsequently, a replacement card with a new account number will be sent to the Cardholder. Cards reported lost or stolen are immediately blocked from accepting additional charges. If unauthorized charges have occurred, they should be disputed.

CITIBANK VISA RESPONSIBILITY

CITIBANK VISA will take immediate action to cancel the card reported lost or stolen.

CITIBANK VISA will initiate steps to issue a replacement card within 48 hours. The replacement card will be sent to the Program Administrator.

PROGRAM ADMINISTRATOR RESPONSIBILITY

Upon receipt of the new card, the Program Administrator will record the receipt of the replacement card and the Program Administrator will then release the replacement card to the cardholder.

How to Dispute a charge:

Cardholders should ensure all items are received in satisfactory condition and dispute any items not received. The Cardholder should attempt to resolve disputes or billing errors directly with the vendor and notify Citibank if the dispute or billing error is not satisfactorily resolved. If the Cardholder cannot resolve a dispute with a vendor or there is a charge that is unauthorized or unrecognized on the Cardholder's Citibank statement, the Cardholder may dispute the charge.

Cardholders can dispute charges by phone or online. Any dispute must be done *within 60 days of the statement date*. Citibank will investigate the dispute on the cardholder's behalf and assist in the resolution. Citibank will issue a temporary credit pending final resolution.

By Phone- Cardholder may initiate a dispute with Citibank by calling the Customer Service at 1-800-248-4553.

Online- Following are the steps needed to access and complete the dispute form on the CitiDirect On-Line system:

1. Access the electronic statement containing the transaction being disputed
2. Click "Option" next to the transaction item you wish to dispute
3. Click "Dispute". The "Dispute Transaction" form appears
4. Scroll to the bottom of the "Dispute Form" window. Click "Print" and then "OK"
5. After the form has been printed, place an "X" in the bracket located to the left of the reason for your dispute. Sign, date, and fax the form along with any necessary documentation to Citibank at 605-357-2019 for investigation and resolution.

Printing your Monthly CITIBANK Statement-

Available after the 6th of each Month

- Website: <https://home.cards.citidirect.com/CommercialCard/Cards.html>
- Enter the username and password you created during the self-registration process and hit LOGIN.
- If you forgot your username and/or password, use the appropriate link OR customer service can assist you by calling 1-800-248-4553.

Viewing/printing Online Statements

- After signing on to the Citi Commercial Cards System you are ready to get started.
- Click on the red button that says "View Statements".
- From there, you can either use the print button on the right of the page, then hit print again when prompted.

OR

- You can hit the download button for a larger print.

KEEP THIS STATEMENT UNTIL YOU ARE READY TO RECONCILE. PRINT 2 COPIES- ONE FOR Program Administrator and ONE FOR YOUR DEPARTMENT. VERIFY THAT ALL CHARGES MATCH YOUR RECORDS. SUNY UPSTATE HAS 60 DAYS TO DISPUTE FROM DATE OF INVOICE.

SUNY Reconciliation Instructions

Reconcile and Certify Citibank Charges in Finance &Mgmt Web Procurement Application

The screenshot shows the SUNY Upstate Medical University Intranet interface. The browser window is titled "iPage | iPage | SUNY Upstate Medical University - Windows Internet Explorer". The address bar shows "http://www.upstate.edu/intra/". The page features a navigation bar with links like "Upstate Home", "University Hospital", "Library", "Volunteering", "HR", "Groupwise", "Directory", "Calendar", and "Departments". Below this is a search bar and a "Web Pages" / "People" toggle. The main content area has a "HOME" button and a list of categories: "ALL STAFF", "STUDENTS", "FACULTY", "RESEARCHERS", "HEALTHCARE PROVIDERS", and "ADMINISTRATORS/MANAGERS". A dropdown menu is open under "ADMINISTRATORS/MANAGERS", showing options like "Clinical Launch Pad", "Business Objects", "HBI", "Progress", "SUNY Portal", and "All Administrators Links". The "SUNY Portal" option is highlighted with a yellow box and a callout that says "Select SUNY Portal". Below the dropdown, there are several promotional banners: "PROUD TO KNOW", "FLU VACCINE ALERT", and "SAVE A BUCK PROGRAM". At the bottom, there is a section for "Upstate Intranet Quick Links" with icons for "Upstate Directory", "BlackBoard", "Help Desk", "Self Serve", "Policies & Forms", and "My Upstate".

SUNY Secure Sign On - Windows Internet Explorer

https://www.suny.edu/security/login/loginForm.do?redirectUrl=https://www2.sysadm.suny.edu/E

File Edit View Favorites Tools Help

Self-Serve Login SUNY Secure Sign On Google Back-Office Login Form

SUNY Secure Sign On

McAfee

Live Search

Page Safety Tools

SUNY SECURE Sign On

Please select your campus, then enter the appropriate credentials below. [Help](#)

* Required Fields


Your Campus:* Upstate Medical

GroupWise User ID:* SMITHJP

GrpWise Password:*

Remember me? ☒

Login

 The State University of New York

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Internet 100%

Input your **GroupWise user id**

Input your **GroupWise password**
(for CG people who do not have GroupWise email, passwords are the last four digits of their ISO number on their badge followed by their four digit year of birth).

SUNY Employee Services P... x +

https://www2.sysadm.suny.edu/employeeServices/main/employeePortal.cfm Search

Most Visited Getting Started Suggested Sites Web Slice Gallery

SUNY SECURE

Employee Services Portal

Portal Home Reports Sign Off Contact Us

Business Systems Applications E-Business Services Enrollment Management Specialty Websites More >>

[Finance & Management System Applications](#)

[Human Resource Systems](#)

[IDL Inquiry Form](#)

[JCOPE - Financial Statement Disclosure Filing \(NYS Directory Services\)](#)

[SMRT - SUNY Management Resource Tool](#)

Click on Finance & Mgmt

Account-Sub Account- Fiscal Year	Total Allocated	Total Expended	Total Encumbered	Balance
There are no accounts assigned at this time.				

*ALL Fields are Required

Account: Sub- Account:

☐ Add ☐ Delete

Welcome KHASIDIM
28110 - Upstate Medical, 12/28/15

[My Profile \(-\)](#)

[Configure initial web access](#)

[My Tools \(-\)](#)

[SUNY Online Directory](#)

[My Links \(-\) \(edit\)](#)

[Would you like to add some personal Links?](#)

Training/Presentation Materials




Data Transfer System - SUNY Emergency Alert
[Presentation Materials - Demonstrations - Documents](#)

University Systems Strategic Business Plan
[SUBOA Working Committee Status Meetings](#)

Finance and Management
[SMRT Training Document](#)
[Web/Legacy Training Documents and Procedures](#)
[Finance BI Training Template - Detailed](#)
[Finance BI Training Template - Basic](#)

Institutional Research
[Academic Programs Enterprise System \(APES\) Campus View Demonstration](#)
[Data Transfer System \(DTS\) Demonstration](#)
[Institutional Research SUNY Management Resource Tool \(SMRT\) Demonstration](#)
[SUNY Business Intelligence Initiative \(SBII\) Dashboard](#)

Important Information

 **SUNY Emergency Contact System**  

Employee Directory

The online directory provides the ability to search for employees in the SUNY Campus Directories.

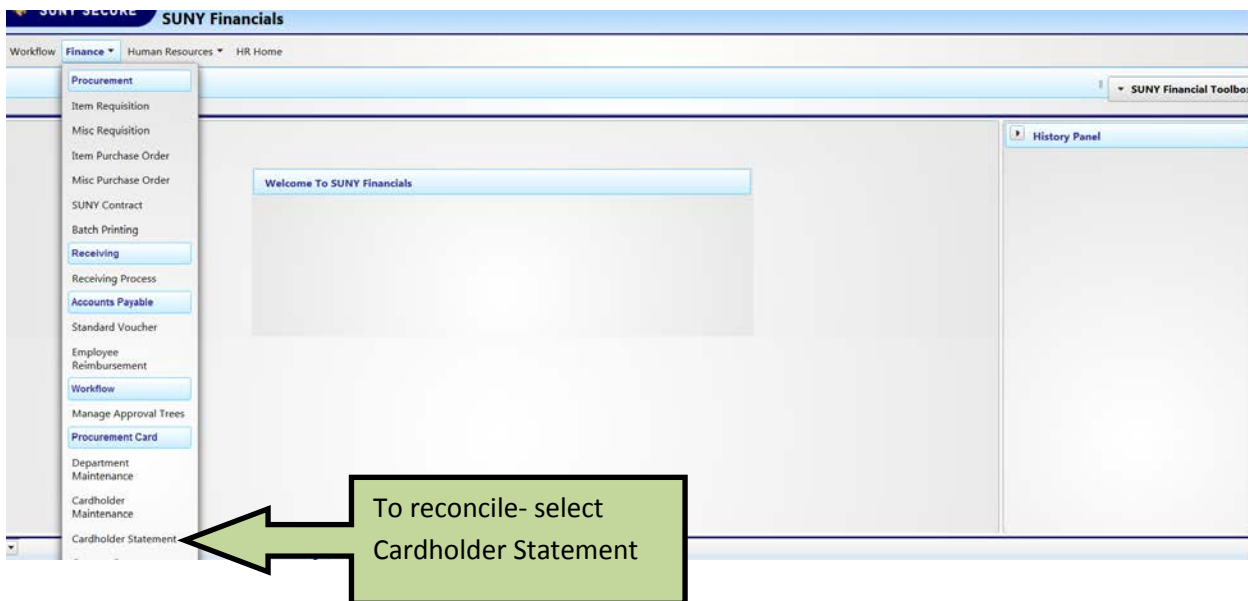
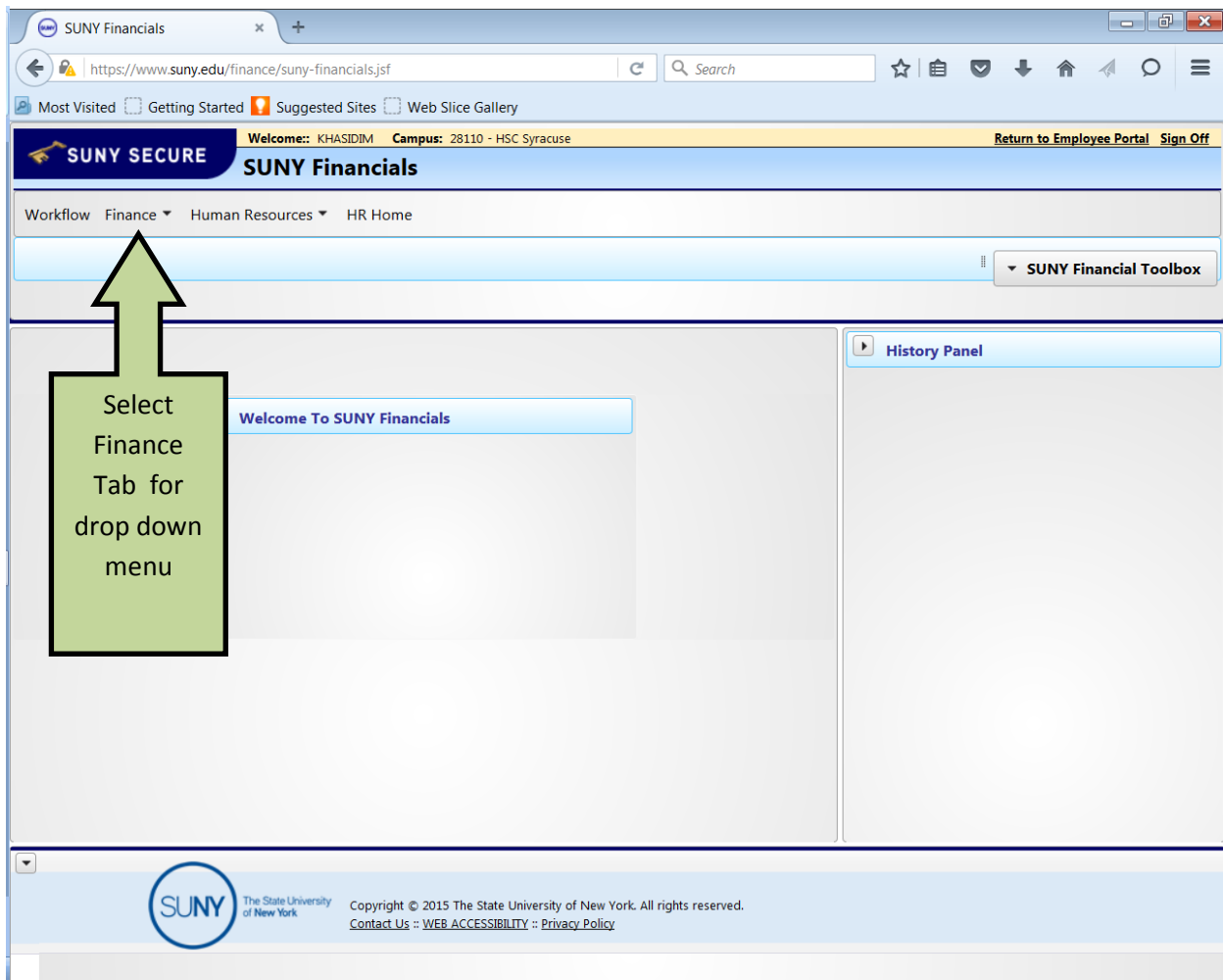
[SUNY Campus Directories](#)

Enter one or more search criteria.

Last Name:

First Name:

☒ Begins with ☐ Contains



SUNY Financials P-Card - C...

https://www.suny.edu/pcard/statement.jsf

Most Visited Getting Started Suggested Sites Web Slice Gallery

SUNY SECURE Welcome: KHASIDIM Campus: 28110 - HSC Syracuse Return to Employee Portal Sign Off

SUNY Financials P-Card

Workflow Finance Human Resources HR Home

Cardholder Statement Your Settings

Statement View

Select Period

Statement Cycle: Dec 07 2015 - Jan 06 2016 (Current)

Statement Information

Statement Date: January 6, 2016
Cardholder Name: MICHELE KHASIDIS
Statement Transaction Count: 3

Cardholder Certification: Not Certified
Default Account: 8608960000
SFS Journal Number: E176306

Statement Detail

Trans. Date	Vendor Name	Trans. Description	Account Number(s)	Trans. Amount	Funding Amount	Actions
12/22/2015	CTC CONSTANTCONTACT.COM	Continuity/Subscription Merchants	8608960000	\$43.20	\$43.20	Edit
12/16/2015	PET SOLUTIONS	Pet Shops, Pet Food Suppliers	8608960000	\$67.49	\$67.49	Edit
12/15/2015	GYPSUM WHOLESALERS, INC.	Construction Materials Not Classified	8608960000	\$2,055.52	\$2,055.52	Edit
Statement/Funding Total:				\$2,166.21	\$2,166.21	

Reconcile the month marked (Current) note: You will not be able to reconcile the current if you did not reconcile prior

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SUNY Financials P-Card - C...

https://www.suny.edu/pcard/statement.jsf

Most Visited Getting Started Suggested Sites Web Slice Gallery

SUNY SECURE Welcome: KHASIDIM Campus: 28110 - HSC Syracuse Return to Employee Portal Sign Off

SUNY Financials P-Card

Workflow Finance Human Resources HR Home

Cardholder Statement Your Settings

Statement View

Select Period

Statement Cycle: Dec 07 2015 - Jan 06 2016 (Current)

Statement Information

Statement Date: January 6, 2016
Cardholder Name: MICHELE KHASIDIS
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Statement Detail

Trans. Date	Vendor Name	Trans. Description	Account Number(s)	Trans. Amount	Funding Amount	Actions
12/22/2015	CTC CONSTANTCONTACT.COM	Continuity/Subscription Merchants	8608960000	\$43.20	\$43.20	Edit
12/16/2015	PET SOLUTIONS	Pet Shops, Pet Food Suppliers	8608960000	\$67.49	\$67.49	Edit
12/15/2015	GYPSUM WHOLESALERS, INC.	Construction Materials Not Classified	8608960000	\$2,055.52	\$2,055.52	Edit
Statement/Funding Total:				\$2,166.21	\$2,166.21	

To change State account to charge and or sub-object, select edit. NOTE: If you only use a default account, you can leave the charge as is. If you only need to change the sub-object, you can.

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After Clicking EDIT- the below screen will pop up. Here you can change the account # or sub-object by selecting **EDIT FUNDING**

Transaction Details

Purchase Date: 12/16/2015
 VISA Ref Number: 24445005350300301941920
 Vendor Name: PET SOLUTIONS
 City: 800-737-3868 State: OH
 Commodity Code: P-Contract Number:

Amount: \$67.49
 ZIP: 454340000 Country: US

Funding Information

Select	Account Number	Fiscal Year	Object	Amount	Description
<input checked="" type="radio"/>	8608960000	2015	532300	\$67.49	

Edit Funding

Save

Funding Line screen : Here you can change the account Number, Sub-Object and can split the charge if applicable. You do not need to fill in item description.

You will only see accounts that you have authority to use. Delete the account listed and input the desired account # to charge.

After you enter your account #, select Save & Return. If entering more than one account, you will select Save/Add next account.

Funding Line

* Account Number: 8608960000 - PCARD LOCAL CONTROL ACCT
 * Sub Object Code: 532300 - LAB-ANIMALS
 * Fiscal Year: 2015 * Amount: \$67.49

Funding Description:

+ Save / Add Next Account **Save & Return**

The screenshot shows a web browser window with the URL <https://www.suny.edu/pcard/statement.jsf>. The page title is "SUNY Financials P-Card". A modal window titled "Added/Updated Funding Successfully" is displayed in the center. It contains two sections: "Transaction Details" and "Funding Information".

Transaction Details:

- Purchase Date: 12/16/2015
- VISA Ref Number: 24445005350300301941920
- Amount: \$67.49
- Vendor Name: PET SOLUTIONS
- City: 800-737-3868
- State: OH
- ZIP: 454340000
- Country: US
- Commodity Code:
- P-Contract Number:

Funding Information:

Select	Account Number	Fiscal Year	Sub Object	Amount	Description
<input type="checkbox"/>	9000031400	2015	531000	\$67.49	

Buttons: Edit Funding, Save

A blue arrow points from the "Added/Updated Funding Successfully" message to the text box below. A green arrow points from the text box back to the "Save" button.

After changing either the account# or sub-object code the above screen will appear:

"Added/Updated Successfully" If you receive a red error, contact your administrator and let them know the error.

Hit Save and continue on to your next charge.

Statement Cycle: Dec 07 2015 - Jan 06 2016 (Current)

Statement Information

Statement Date: **January 6, 2016** Cardholder Certification: **Not Certified**
 Cardholder Name: **MICHELE KHASIDIS** Default Account: **8608960000**
 Statement Transaction Count: **3** SFS Journal Number: **E176306**

Statement Detail

Trans. Date	Vendor Name	Trans. Description	Account Number(s)	Trans. Amount	Funding Amount	Actions
12/22/2015	CTC CONSTANTCONTACT.COM	Continuity/Subscription Merchants	8608960000	\$43.20	\$43.20	Edit
12/16/2015	PET SOLUTIONS	Pet Shops, Pet Food Suppliers	9000031400	\$67.49	\$67.49	Edit
12/15/2015	GYPSUM WHOLESALE, INC.	Construction Materials Not Classified	0164110300	\$2,055.52	\$2,055.52	Edit
Statement/Funding Total:				\$2,166.21	\$2,166.21	

Certify Charges- Cardholders can certify their charges after editing the charge as applicable. Cardholders can click CERTIFY once they receive notification from the Program Administrator.

Charges can be corrected by de-certifying the statement charges only if Accounts Payable has not final certified for the campus. Otherwise, any changes to accounts after clicking CERTIFY would need to be done by journal transfer.

Read and accept disclaimer. This certifies that the charges are correct and where purchased for Campus use following statute and campus guidelines.

Click CERTIFY

IMPORTANT - Please Read

I, **[Redacted]** certify that the purchases and amounts listed on this account statement are correct and required to fulfill the mission of my Campus, do not exceed spending limits approved by the Program Administrator, are not for my personal use and are not for items prohibited by statute or by my Campus.

Date: **June 25, 2015**

Certification Reason/Comments:

Packets to submit to VISA Program Administrator

After you have reconciled, please submit your packets each month:

Campus Purchasing SLC

Phone number: 4-5720 or 4-4598

*Your packet will be audited by the Program Administrator for completeness and kept on file.

Please note that the Office of State Comptroller can audit SUNY Upstate for VISA charges *

Packets to be sent to Program Administrator:

In the following order:

- 1) Certification Page (Cardholder and Cardholder's Supervisor will both sign this form)
- 2) Citibank Statement
- 3) All receipts/invoices/ packing slips for each item

*****Only submit one packet*****

Packets to keep for your records:

For all monthly certifications, please keep a copy on file:

- 1) Certification Page
- 2) Citibank Statement
- 3) Receipts/invoices

**Citibank® Commercial Cards
Cardholder Dispute Form**

Inquirer's Name: _____ Date: _____

Cardholder's Name: _____

Account Number: _____

Cardholder: Please provide a copy of any information / forms requested below along with the statement where the disputed charge appears and send via fax or mail to:

FAX TO: 605-357-2019

OR

MAIL TO: Citibank® Commercial Cards
701 E. 60th ST. N Mail Code 3270
P.O. BOX 6125
Sioux Falls, S.D. 57117

This form must be filled out completely and forwarded to Citibank and appropriate Agency Officials (as determined by your internal procedures) within 60 calendar days of the disputed charges' posting date so that we may investigate.

Transaction Date: _____ Dollar Amount of Charge: \$ _____

Merchant: _____

Cardholder Signature: _____

Please read carefully each of the following descriptions and check the one most appropriate to your particular dispute. If you have any questions, please contact us at 1-800-248-4553 (overseas call collect, 904-954-7850). We will be more than happy to advise you in this matter.

• **UNAUTHORIZED TRANSACTION**

☐ I have not authorized this charge to my account.

• **DUPLICATE PROCESSING—THE DATE OF THE FIRST TRANSACTION WAS _____.**

☐ The transaction listed above represents a multiple billing to my account. I only authorized one charge from this merchant for this amount. My card was in my possession at all times.

• **MERCHANDISE OR SERVICE NOT RECEIVED IN THE AMOUNT OF \$ _____.**

(Please provide a separate statement detailing the merchant contact, and the expected date to receive merchandise.)

☐ My account has been charged for the above transaction, but I have not received the merchandise or service. I have contacted the merchant but the matter was not resolved.

• **MERCHANDISE RETURNED IN THE AMOUNT OF \$ _____.**

(Please provide a separate statement detailing the merchant contact, and the expected date to receive merchandise.)

☐ My account has been charged for the above listed transaction, but the merchandise has since been returned.

Enclosed is a copy of my postal or UPS receipt.

• **CREDIT NOT RECEIVED**

☐ I have received a credit voucher for the above listed charge, but it has not yet appeared on my account. A copy of the credit voucher is enclosed.

• **DIFFERENCE IN AMOUNT**

☐ The amount of this charge has been altered since the time of purchase. Enclosed is a copy of my sales draft showing the amount for which I signed. The difference of amount is \$ _____.

• **COPY REQUEST**

☐ I recognize this charge, but need a copy of the sales draft for my records.

• **SERVICES NOT RECEIVED: Please enclose a separate statement with the date of the merchant contact and response.**

☐ I have been billed for this transaction; however, the merchant was unable to provide the services.

☐ Paid for by another means. My card number was used to secure this purchase; however, the final payment was made by check, cash, or another credit card. [Enclosed is my receipt, canceled check (front and back), copy of credit card statement, or applicable documentation demonstrating that payment was made by other means.]

• **NOT AS DESCRIBED**

☐ The item(s) specified do not conform to what was agreed upon with the merchant. (The cardholder must specify what goods, services, or things of value were received. The cardholder must have attempted to return the merchandise and state so in his/her complaint.)

• **If none of the above reasons apply:**

Provide a complete description of the problem, attempted resolution and outstanding issues. Use a separate sheet of paper and sign and date your description statement.

Public Sector Dispute Form
PS003 Final 05/18/08

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SUNY Upstate Medical's Unallowable VISA Card Charges and SUNY Exclusions

- Computers – to include tablets, iPads
- Printers
- EBAY
- Food/Restaurants
- Gifts and Gift Cards (retirement, birthday, award plaques/trophies, etc.), flowers, fruit baskets
- Payments to Employees or Non-Employees (consultants/guest speakers)
- Charitable donations or political contributions
- Heaters/fans/humidifiers/dehumidifiers
- Televisions
- Clothing – uniforms, work boots, etc.
- Appliances – refrigerators, microwaves, etc.
- Anything labor related.

Purchase Card MCC Template for Exclusions Template Name SNY

MCC Description	MCC #
Airline	3000-3299,4511,4582,4722,4723,4761
Lodging	3501-3799,7011
Car Rental	3351-3441,7512
Steamship & Cruise Lines	4411
Money Transfer-Merchant	4829
Precious Stones & Metals	5094
Mobile Home Dealers	5271
Duty free stores	5309
Motor Home Dealers	5592
Furs and Furriers	5681
Package Stores-Beer, Wine & Liquor	5921
Antique Shops	5932
Pawn Shops	5933
Antique Reproduction Stores	5937
Jewelry	5944
Fin. Institutions-Manual Cash Disbursements	6010
Fin. Institutions-Automated Cash Disbursements	6011
Member Fin. Institutions-Merchandise & Svcs	6012
Quasi Cash-Member Financial Institutions	6050
Quasi Cash-Merchant	6051
Remote Stored Value Load	6529-6530
Payment Service Provider	6531-6533
Money Transfer-Member Financial Institution	6534
Value Purchase -Member Financial Institution	6535
Savings Bonds	6760
Time shares	7012
Funeral Services & Crematories	7261
Dating/Escort Services	7273
Tax Preparation Service	7276
Counseling service-debt, marriage, personal	7277
Massage Parlors	7297
Health and Beauty spas	7298
Golf Courses	7992
Video Amusement game supplies	7993
Betting Facilities	7995
Country Clubs	7997
Dentists & Orthodontists	8021
Child Care Services	8351
Court Costs incl. Child Support	9211
Fines	9222
Bail & Bond Payments	9223
Tax Payments	9311
Food Stamps	9401
Automated Referral Services	9700

TO BE RETAINED BY VENDOR AS
EVIDENCE OF EXEMPT SALE**TAX EXEMPTION CERTIFICATE**STATE OF NEW YORK
For use only by Employees of the State of New York
or its political subdivisions.

Date

Name of Person or Firm Furnishing Services and/or Materials

Address

This is to certify that I am an employee of the State of New York or one of its political subdivisions; that the services or materials purchased on the date set forth below will be paid for by the State or a political subdivision; and that such charges are incurred in the performance of my official duties.

NY State Purchase

Nature of Transactions

Dates of Transactions

State Dept., Agency or
Political Subdivision

SUNY Upstate Medical University - EX-14740026K

.....
Signature of Employee.....
Title

NOTE: A separate exemption certificate is required from each person claiming exemption.

Monthly Checklist

For each month that you have charges and or / credits:

- ☐ Print Citibank Credit Card Statement
- ☐ Certify Charges in Finance and Management- Procurement Card Module
- ☐ Printed your certification Page –signed by cardholder and supervisor
- ☐ Attach & Secure Itemized Invoices & Receipts for each of the charges/credits as shown on your Citibank Statement.
- ☐ Provide Backup, justification, and/or necessary approval for those charges that require it.
- ☐ Confirm Sales Tax has not been charged.
- ☐ If sales tax has been charged- cardholder has notified vendor to process a credit to the VISA card. Note on log or next to tax amount on the invoice that a credit has been requested. Attach confirmation of the credit. On the next statement, copy of documentation with the credit that has been applied.
- ☐ Submit packet to Program Administrator (Signed Certification page, Citibank Statement, Back up Documents-all ORIGINAL- invoice/receipts, and any justifications/approvals).