



DEPARTMENT OF THE ARMY
 UNITED STATES ARMY JOHN F. KENNEDY SPECIAL WARFARE CENTER AND SCHOOL
 FORT BRAGG, NORTH CAROLINA 28310

REPLY TO
 ATTENTION OF:

AOJK-RMP

MEMORANDUM FOR MEMBER

SUBJECT: **Transfer** of Government Charge Card (GTC)

1. Welcome to the US Army Special Warfare Center and School (SWCS)! In order to transfer the government travel card account listed to the SWCS hierarchy, we request the following items: Name, SSN, Unit, home address (including city, and zip code), home phone number, duty phone number, and Government Travel Card Account Number.
2. Point of Contact for this action is the undersigned at COMM: (910) 432-6160 or DSN 239-6160

TONI BROOKS
 AGENCY PROGRAM COORDINATOR

CARD HOLDER AGREEMENT

I will return the statement of understanding signed by my supervisor within 30 days of my arrival. The following information is provided in order to activate/transfer my account.

NAME: _____

SSN: _____ EMAIL: _____

UNIT: _____
 Headquarters and Headquarters Detachment, 3rd BN, 1st Special Warfare Training Group (Airborne)

HOME ADDRESS: _____

HOME PHONE/DUTY PHONE: _____

GOVERNMENT TRAVEL CARD ACCOUNT NUMBER: _____

EXPIRATION DATE: _____ / _____ DOB: _____

CARDHOLDER SIGNATURE _____ DATE _____

Date Transfer completed: _____ Initials _____

Date Address update completed: _____ Initials _____

**USAJFKSWCS STANDARD OPERATING PROCEDURES
GOVERNMENT TRAVEL CARD STATEMENT OF UNDERSTANDING**

I understand that in addition to the Department of Defense Travel Card Program (Cardholder Account Agreement) I agree to and understand the following: Initial each item below:

1	Use the card only for official travel and official travel related expenses away from my official duty station as per USASOC Standard Operating Procedures (regulation), Government Travel Charge Card Program.	___
2	If I am issued a restricted card, it is my responsibility to supply my Agency Program Coordinator (APC) with orders for activation of my card at least 2 days prior to travel. I fully understand that my account will remain in a deactivated status upon completion of travel.	___
3	File the DD Form 1351-2 (Travel Voucher), within 5 days of completion of duty. It is mandatory that the split disbursement option be used to pay the travel card charges.	___
4	I understand that it is my responsibility to pay the account in full and on time regardless of my travel reimbursement claim.	___
5	If my TDY is over 45 days, I will file the DD Form 1351-2 (Travel voucher), every 30 days.	___
6	If my account becomes delinquent for 30 days, my supervisor will be notified and I may receive adverse counseling.	___
7	If my account becomes delinquent for 60 days, my card will be automatically suspended, until paid in full, and I will receive a written counseling from my Commander/Supervisor. If I am a standard cardholder my card will then be restricted and require activation by APC for use.	___
8	If my account is delinquent for 60 days two (2) times in a calendar year it will be cancelled.	___
9	If my account becomes delinquent for 90 days, I may receive a General Officer Memorandum of Reprimand from my Commander or the USAJFKSWCS Chief of Staff which may be filed in my Official Military Personnel File (OMPF).	___
10	If my account becomes delinquent for 120 days, I will receive a 120 days Cancellation Notice and my debt will be forwarded to DFAS for Salary Offset, 15% per pay period, and I may be subject to, but not limited to, the following: General Officer Memorandum of Reprimand, Bar to Reenlistment, Administrative Separation, and Non-judicial Punishment under Article 15, UCMJ.	___
11	If I accidentally use my card for unauthorized charges I will contact the APC immediately.	___
12	I understand that cash withdrawals are to be made no more than three (3) days prior to travel, and that frequent withdrawals are considered misuse and are unauthorized.	___
13	If I MISUSE/ABUSE the Government Travel Card (GTC), regardless of the payment status of my account, it will be deactivated and I may be subject to, but not limited to, the following: (1) First time confirmed unauthorized charges: I may receive a written Counseling Statement by my Commander/Supervisor and my card may be restricted. (2) If confirmed unauthorized charges occur again, my card will be cancelled. I may be subject to, but not limited to the following: General Officer Memorandum of Reprimand, Bar to Reenlistment, Administrative Separation, and Non-judicial Punishment under Article 15, UCMJ.	___
14	It is my responsibility to notify the APC if I transfer organizations, change duty station, or am discharged.	___
15	I also understand that I AM REQUIRED TO USE THE "SPLIT DISBURSEMENT" PAYMENT OPTION in block 1 of DD Form 1351-2 (Travel Voucher) or in the Defense Travel System (DTS) payment options. If DD Form 1351-2 is utilized, I will ANNOTATE THE FULL AMOUNT CHARGED TO THE GOVERNMENT TRAVEL CARD on the amount line provided.	___

I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND THE ABOVE CONDITIONS.

Applicant's Printed Name, Signature, & Date _____
 Commander's Grade, Name, Signature, & Date _____

KATHERINE F. HUET MAJ, CA

ANNEX 1

STATEMENT OF UNDERSTANDING

I certify that I have read the DoD government travel charge card policy and procedures in DoDFMR 7000.14-R, Volume 9, Chapter 3 (FMR). I understand that the Government Travel Charge Card Program is designed to improve the management, efficiency, and control of government travel. I also understand that I am authorized to use the card only for those necessary and reasonable expenses incurred by me for official travel. I will abide by these instructions issued by the Department.

The above limitation on card usage also applies to automated teller machine (ATM) withdrawals. The amount of cash withdrawals may not exceed the cash limits established on the card. If my account is not delinquent and my travel orders authorize a larger advance, I can request an increase in the ATM limit through the Agency Program Coordinator (APC). I will, however, endeavor to charge expenses to the account wherever feasible rather than use cash withdrawals.

I understand the Department's policy requires mandatory use of split disbursement for all outstanding charges on the travel charge card for military personnel and civilian personnel where labor bargaining obligations have been met.

I understand that the issuance of this GTCC to me is an extension of the employee/employer relationship and that I am being specifically directed to:

- Abide by all rules and regulations with respect to the GTCC.
- Use the GTCC only for authorized and official travel.
- Pay all undisputed charges (reimbursable and non-reimbursable) by the due date on the monthly billing statement.
- File travel vouchers promptly within appropriate guidelines.
- Notify the APC of any problems with respect to usage of the GTCC.
- Notify the GTCC contractor and the APC if my card is lost or stolen.

Initials

(Card applicants must initial all the above provisions.)

I also understand that failure on my part to abide by these rules or otherwise misuse the GTCC may result in disciplinary action being taken against me. I also acknowledge the right of the GTCC contractor and/or the APC to revoke or suspend my GTCC privileges if I fail to abide by the terms of this agreement or the cardholder agreement with the GTCC contractor.

(Applicant's Signature)

(Date)

(Supervisor's Signature) (Date)

KATHERINE F. HUET

(Applicant's Printed Name)

(Supervisor's Printed Name)

MAJ, CA HHD/3/1SWTG(A) CDR

(Applicant's/Grade/Title)

(Supervisor's/Grade/Title)