

PURCHASING CARD PAYMENT CODING FORM

PURPOSE:

The State of Missouri and UMB have worked together to establish an interface to allow cardholder transactions to be loaded to the state's accounting system (SAM II). This interface reduces the need for cardholder transactions to be manually data entered into SAM II for payment. The purpose of this form is to identify the SAM II coding to be applied to cardholder accounts that have transactions loaded to SAM II. This SAM II coding will then be applied to each PV document created in SAM II for the cardholder transactions.

INSTRUCTIONS:

- 1. To add SAM II payment coding to purchasing card accounts, please complete the below form.
- Maintain a copy for your records.
- Email the completed form to UMB for entry.
- If a funding source changes, please complete another form.

CARDHOLDER INFORMATION		
LAST NAME	FIRST NAME	MIDDLE INITIAL
AGENCY	DIVISION	CARD NUMBER (Last 4 digits)
E-MAIL ADDRESS	PHONE NUMBER	
SAM II PAYMENT CODING		

SAM II Field	Payment Coding	Description
AGENCY		This is a 3 digit code used to identify the agency. Refer to Agency Index (AGCY) and Fund Agency Index (FAGY) for valid values.
FUND		This is a 4 digit code used to identify the funding source. See Fund Index (FUND) for valid values.
ORG		This is a 4 digit code used to identify the organization. Refer to Organization Index (ORGN) for valid values.
FUNCTION		This is a 4 digit code used to identify the function. See Function (FUNC) for valid values.
SUB-ORG		This is a 2 digit code used to identify the sub-organization. See Sub-Organization (SORG) for valid values.
APPR		This is a 4 digit code used to identify the appropriation. See Appropriation (EAPP) for valid values.
ACTIVITY		This is a 4 digit code used to identify the activity. See Activity Index (ACTV) for valid values.
REPT CAT		This is a 4 digit code used to identify the reporting category. See Reporting Category (RPTG) for valid values.

Note: All fields are not required. The fields entered will automatically populate when loaded to SAM II, but these fields can be modified in SAM II prior to payment.

AGENCY PURCHASING CARD COORDINATOR ACKNOWLEDGEMENT SIGNATURE OF AGENCY PURCHASING CARD COORDINATOR PRINTED NAME OF AGENCY PURCHASING CARD COORDINATOR E-MAIL ADDRESS DATE **TELEPHONE**