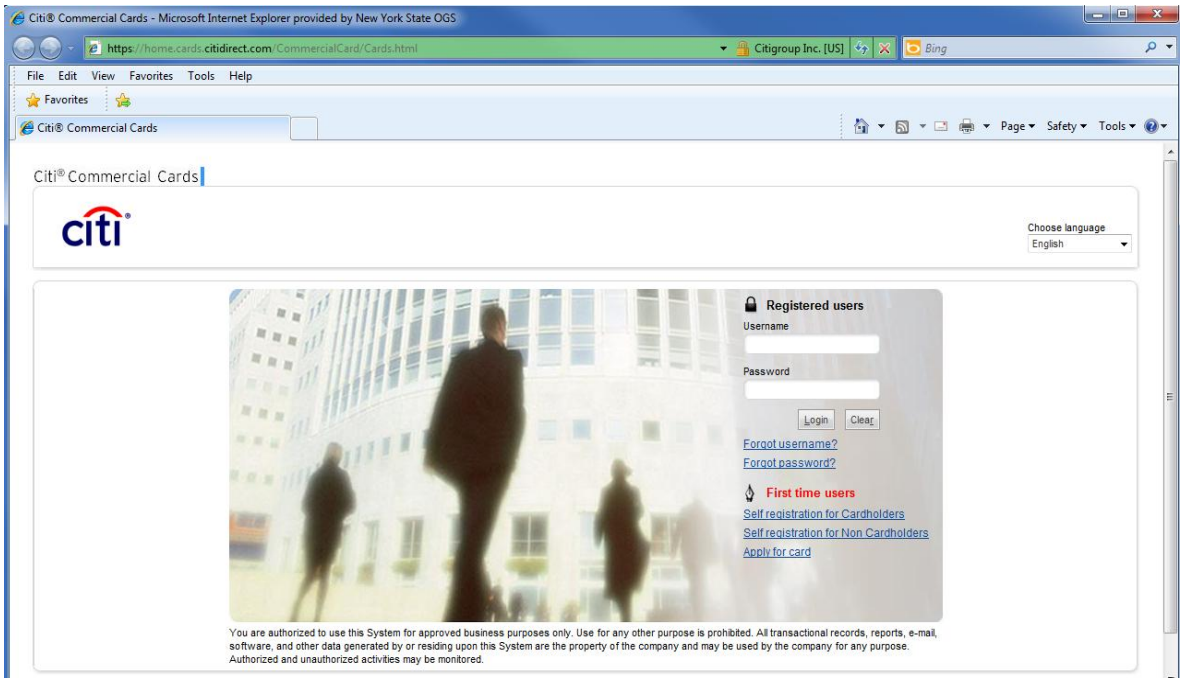
New York State Office of General Services
Business Services Center
50 Wolf Road, 3rd Floor
Albany, NY 12232
(Phone) 518-457-4272

Credit Card Reconciliation
MAST Package

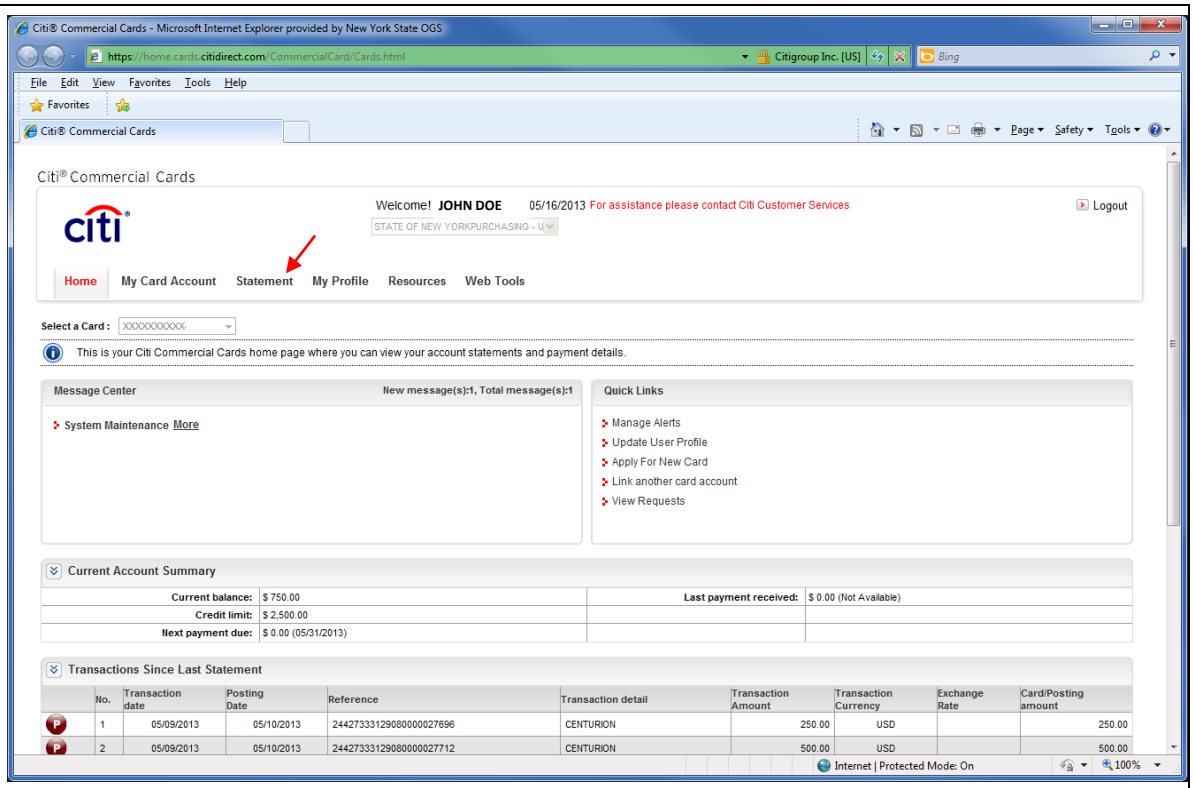
After the cardholder verifies their Citibank card transactions in SFS (See *Reconciling a Procurement Card Transaction in SFS* video), the MAST statement package is prepared for supervisor approval and submission to the BSC.

In this module, you will learn how to complete reconciling the procurement card transaction process by preparing the Monthly Account Summary Transmittal (MAST) statement package.

First, log in to your Citibank card account at: https://home.cards.citidirect.com/CommercialCard/Cards.html.

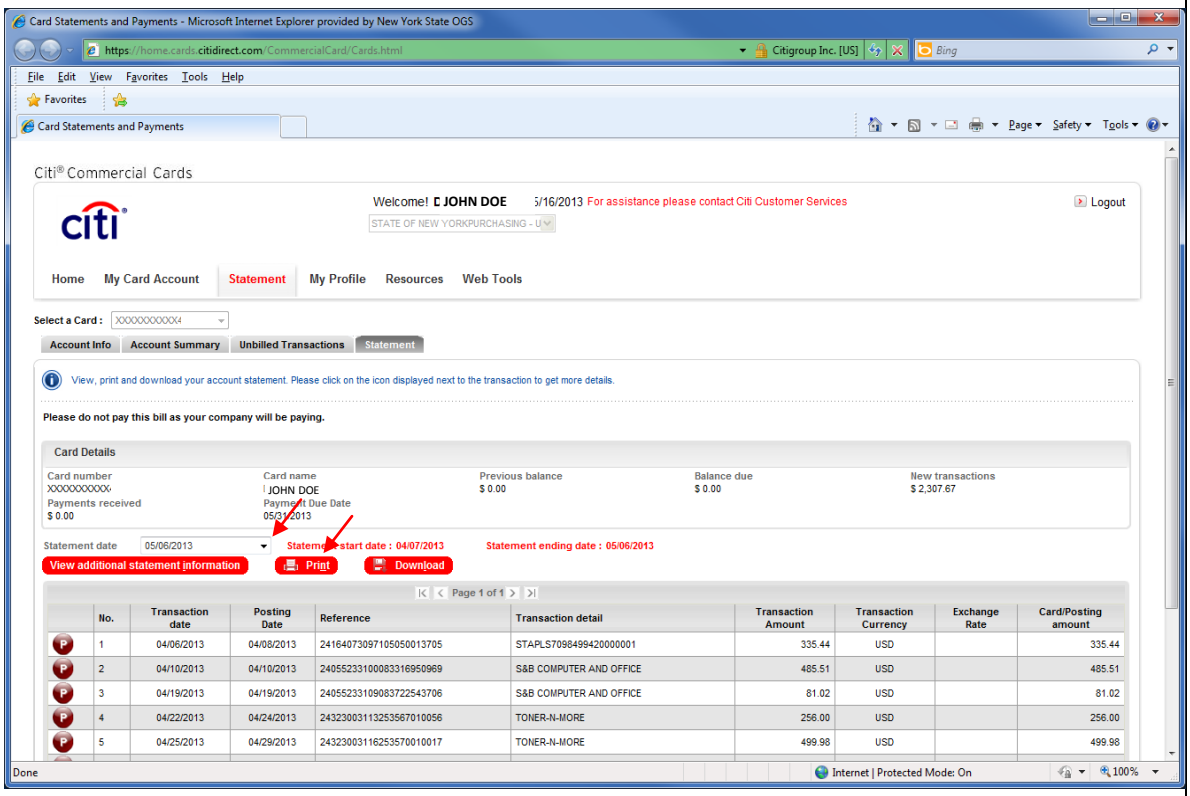


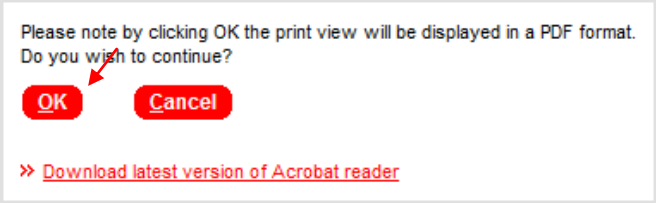
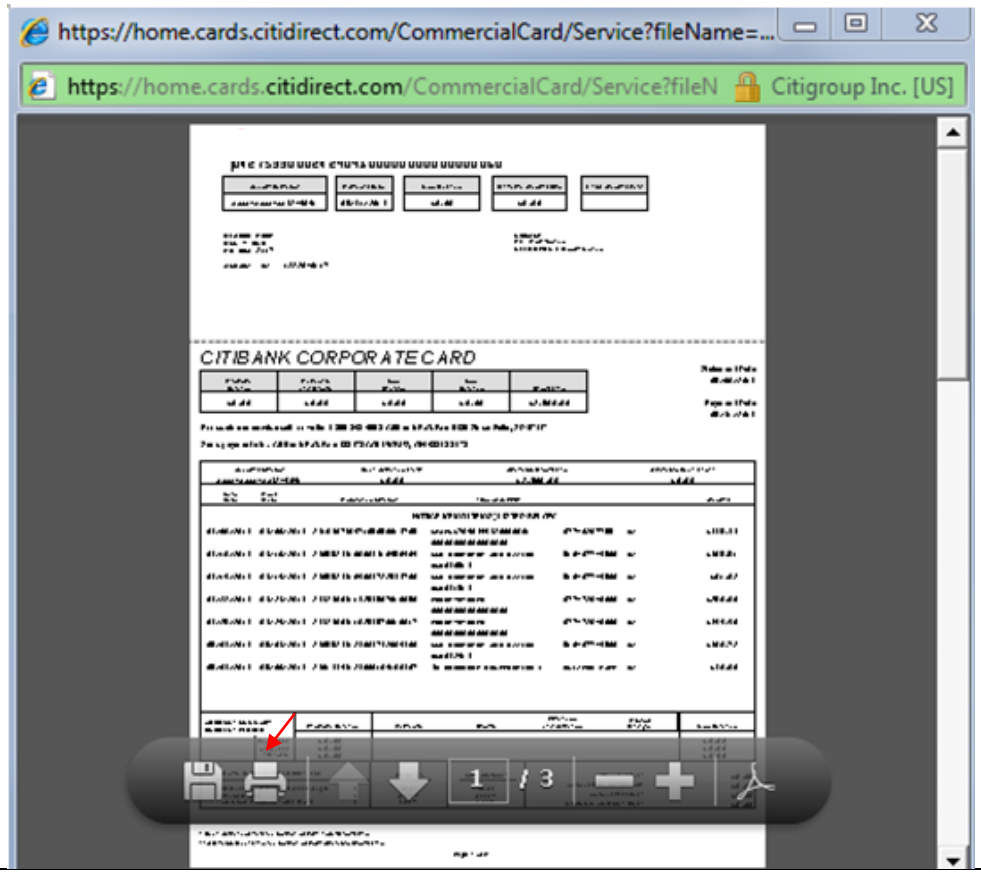
Select Statement.



Select Print for the current statement.

If you wish to print a previous statement, change the statement at the drop down arrow.



Select OK.	
Select print.	

Example of a printed statement. Block out your account number (three locations).	
Number the transactions in order of statement.	

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[redacted]000000000000000060

Account Number	Payment Date	New Balance	Minimum Amount Due	Enter Amount Paid
XXXX-XXXX-XX[redacted]	05/31/2013	$0.00	$0.00	

JOHN DOE
OGS - BSC
PO BOX 2117

ALBANY NY 12220-0117

Citibank
P.O. Box 183173
COLUMBUS, OH 43218-3173

CITIBANK CORPORATE CARD

Previous Balance	Payments and Credits	New Charges	New Balance	Credit Line
$0.00	$0.00	$0.00	$0.00	$2,500.00

Statement Date 05/06/2013

Payment Date 05/31/2013

For customer service call or write 1-800-248-4553 Citibank P.O. Box 6125 Sioux Falls, SD 57117

Send payments to: Citibank P.O. Box 183173 COLUMBUS, OH 43218-3173

Account Number	Cash Advance Limit*	Available Credit Line	Available Cash Line**
XXXX-XXXX-XX[redacted]	$0.00	$2,500.00	$0.00

Sale Date	Post Date	Reference Number	Type of Activity			Amount
**********			NOTICE MEMO ITEM(S) LISTED BELOW			**********
04/06/2013	04/08/2013	24164073097105050013705	STAPLS709849942000001 0000000000000000	877-8267755	NY	$335.44
04/10/2013	04/10/2013	24055233100083316950969	S&B COMPUTER AND OFFICE BSC040513	518-877-9500	NY	$485.51
04/19/2013	04/19/2013	24055233109083722543706	S&B COMPUTER AND OFFICE BSC041513	518-877-9500	NY	$81.62
04/22/2013	04/24/2013	24323003113253567010056	TONER-N-MORE 0000000000000000	877-728-0000	NY	$256.00
04/25/2013	04/29/2013	24323003116253570010017	TONER-N-MORE 0000000000000000	877-728-0000	NY	$455.58
05/03/2013	05/03/2013	24055233123083742689366	S&B COMPUTER AND OFFICE BSC042913	518-877-9500	NY	$300.72
05/03/2013	05/06/2013	24013393123000169106487	3N DOCUMENT DESTRUCTION I	CLIFTON PARK	NY	$40.00

ACCOUNT SUMMARY CURRENT PERIOD	Previous Balance	Payments	Credits	Purchases and Advances	Interest Charges	New Balance
Purchases	$0.00					$0.00
Advances	$0.00					$0.00
TOTALS	$0.00					$0.00

DAYS IN BILLING PERIOD: 030

		Purchases	Cash Advances
Balance Subject To Interest Charges	>	$0.00	$0.00
Periodic Rate	>	.0000%	.0000%
ANNUAL PERCENTAGE RATE	>	0.00%	0.00%

Payment Due:	$0.00
Amount Over Credit Limit:	$0.00
Amount Past Due:	$0.00
MINIMUM AMOUNT DUE:	$0.00

* Cash Advance Limit is a portion of your Total Credit Line
** Available Cash Line is a portion of your Available Credit Line

Page 1 of 2

citi

[redacted]000000000000000060

Account Number	Payment Date	New Balance	Minimum Amount Due	Enter Amount Paid
XXXX-XXXX-XX[redacted]	05/31/2013	$0.00	$0.00	

JOHN DOE
OGS - BSC
PO BOX 2117

ALBANY NY 12220-0117

Citibank
P.O. Box 183173
COLUMBUS, OH 43218-3173

CITIBANK CORPORATE CARD

Previous Balance	Payments and Credits	New Charges	New Balance	Credit Line
$0.00	$0.00	$0.00	$0.00	$2,500.00

Statement Date 05/06/2013

Payment Date 05/31/2013

For customer service call or write 1-800-248-4553 Citibank P.O. Box 6125 Sioux Falls, SD 57117

Send payments to: Citibank P.O. Box 183173 COLUMBUS, OH 43218-3173

Account Number	Cash Advance Limit*	Available Credit Line	Available Cash Line**
XXXX-XXXX-XX[redacted]	$0.00	$2,500.00	$0.00

	Sale Date	Post Date	Reference Number	Type of Activity			Amount
	**********			NOTICE MEMO ITEM(S) LISTED BELOW			**********
1	04/06/2013	04/08/2013	24164073097105050013705	STAPLS709849942000001 0000000000000000	877-8267755	NY	$335.44
2	04/10/2013	04/10/2013	24055233100083316950969	S&B COMPUTER AND OFFICE BSC040513	518-877-9500	NY	$485.51
3	04/19/2013	04/19/2013	24055233109083722543706	S&B COMPUTER AND OFFICE BSC041513	518-877-9500	NY	$81.62
4	04/22/2013	04/24/2013	24323003113253567010056	TONER-N-MORE 0000000000000000	877-728-0000	NY	$256.00
5	04/25/2013	04/29/2013	24323003116253570010017	TONER-N-MORE 0000000000000000	877-728-0000	NY	$455.58
6	05/03/2013	05/03/2013	24055233123083742689366	S&B COMPUTER AND OFFICE BSC042913	518-877-9500	NY	$300.72
7	05/03/2013	05/06/2013	24013393123000169106487	3N DOCUMENT DESTRUCTION I	CLIFTON PARK	NY	$40.00

ACCOUNT SUMMARY CURRENT PERIOD	Previous Balance	Payments	Credits	Purchases and Advances	Interest Charges	New Balance
Purchases	$0.00					$0.00
Advances	$0.00					$0.00
TOTALS	$0.00					$0.00

DAYS IN BILLING PERIOD: 030

		Purchases	Cash Advances
Balance Subject To Interest Charges	>	$0.00	$0.00
Periodic Rate	>	.0000%	.0000%
ANNUAL PERCENTAGE RATE	>	0.00%	0.00%

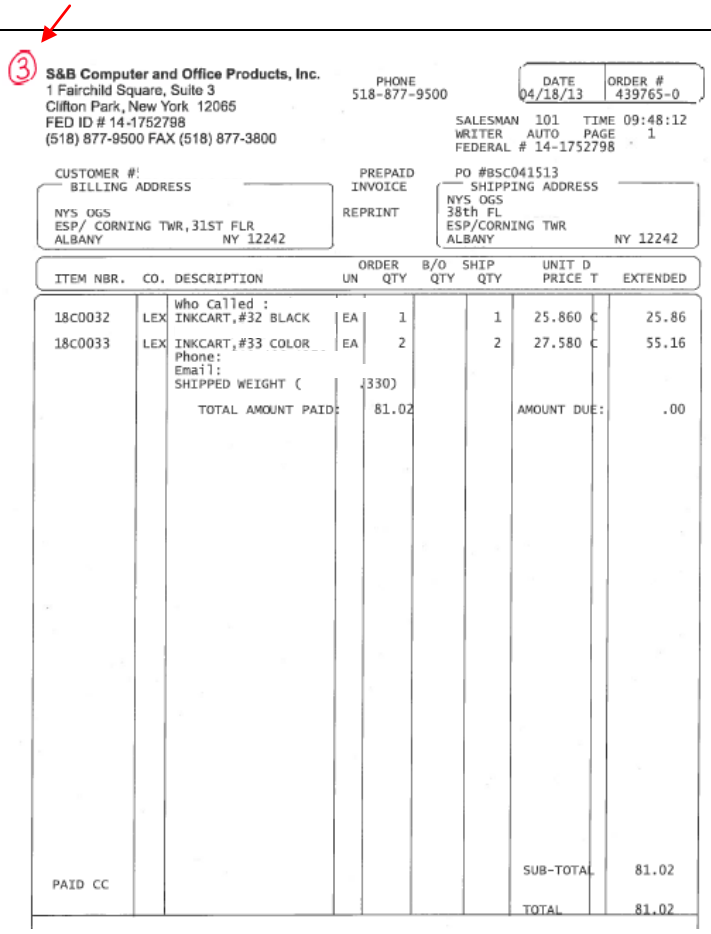
Payment Due:	$0.00
Amount Over Credit Limit:	$0.00
Amount Past Due:	$0.00
MINIMUM AMOUNT DUE:	$0.00

* Cash Advance Limit is a portion of your Total Credit Line
** Available Cash Line is a portion of your Available Credit Line

Page 1 of 2

Provide backup for each transaction. Backup includes the original order, invoice (not packing list), any email correspondence, and receiving notices.

Identify the matching transaction number in the upper left hand corner.



3

S&B Computer and Office Products, Inc.
1 Fairchild Square, Suite 3
Clifton Park, New York 12065
FED ID # 14-1752798
(518) 877-9500 FAX (518) 877-3800

PHONE 518-877-9500

DATE 04/18/13 | ORDER # 439765-0

SALESMAN 101 TIME 09:48:12
WRITER AUTO PAGE 1
FEDERAL # 14-1752798

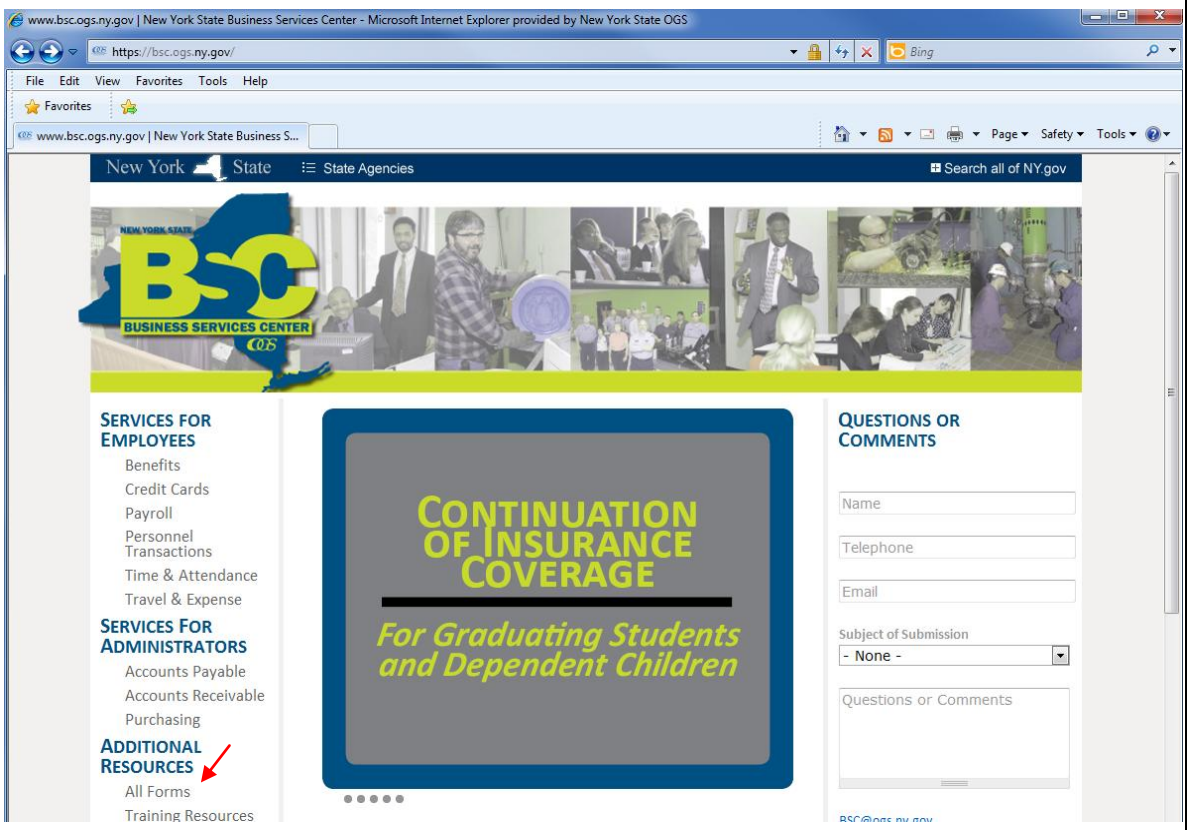
CUSTOMER #:
BILLING ADDRESS
NYS OGS
ESP/ CORNING TWR,31ST FLR
ALBANY NY 12242

PREPAID INVOICE
REPRINT

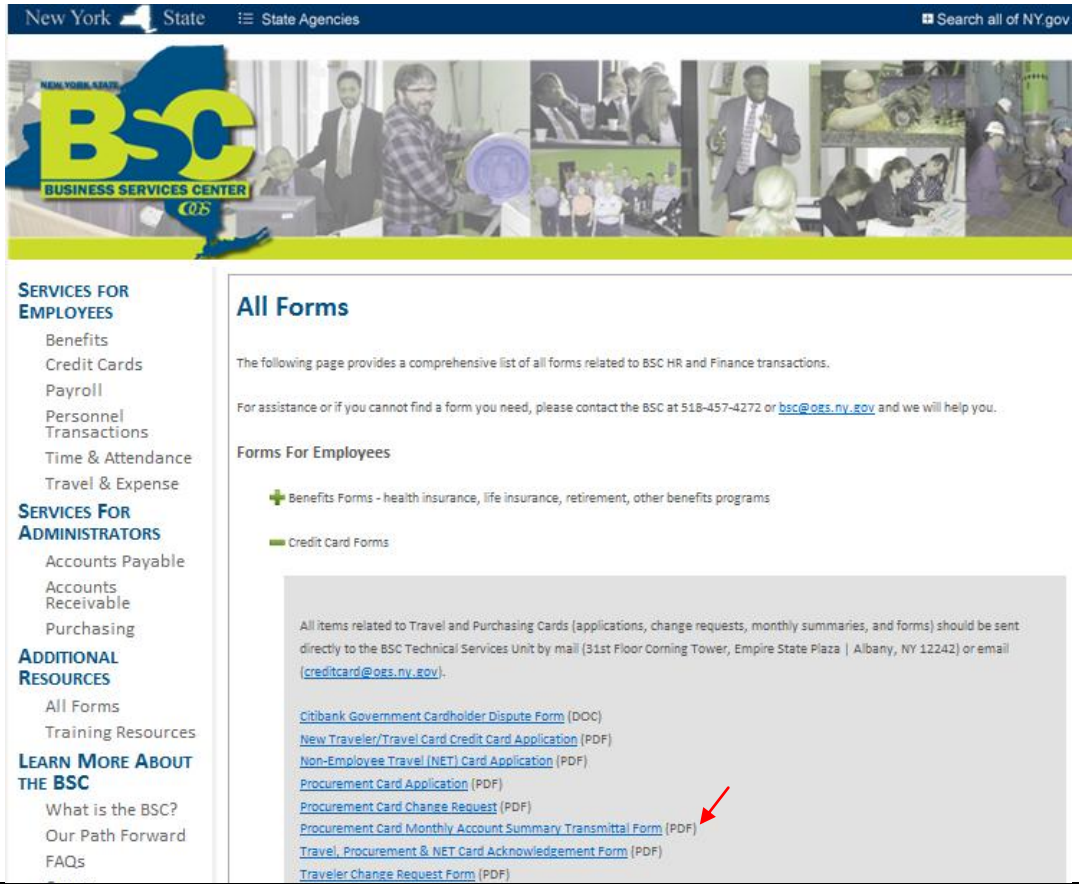
PO #BSC041513
SHIPPING ADDRESS
NYS OGS
38th FL
ESP/CORNING TWR
ALBANY NY 12242

ITEM NBR.	CO.	DESCRIPTION	UN	ORDER QTY	B/O QTY	SHIP QTY	UNIT PRICE	D T	EXTENDED
		Who Called :							
18C0032	LEX	INKCART,#32 BLACK	EA	1		1	25.860	C	25.86
18C0033	LEX	INKCART,#33 COLOR	EA	2		2	27.580	C	55.16
		Phone:							
		Email:							
		SHIPPED WEIGHT (		(330)					
		TOTAL AMOUNT PAID:		81.02			AMOUNT DUE:		.00
							SUB-TOTAL		81.02
PAID CC							TOTAL		81.02

Go to the BSC website: https://bsc.ogs.ny.gov and select All Forms.



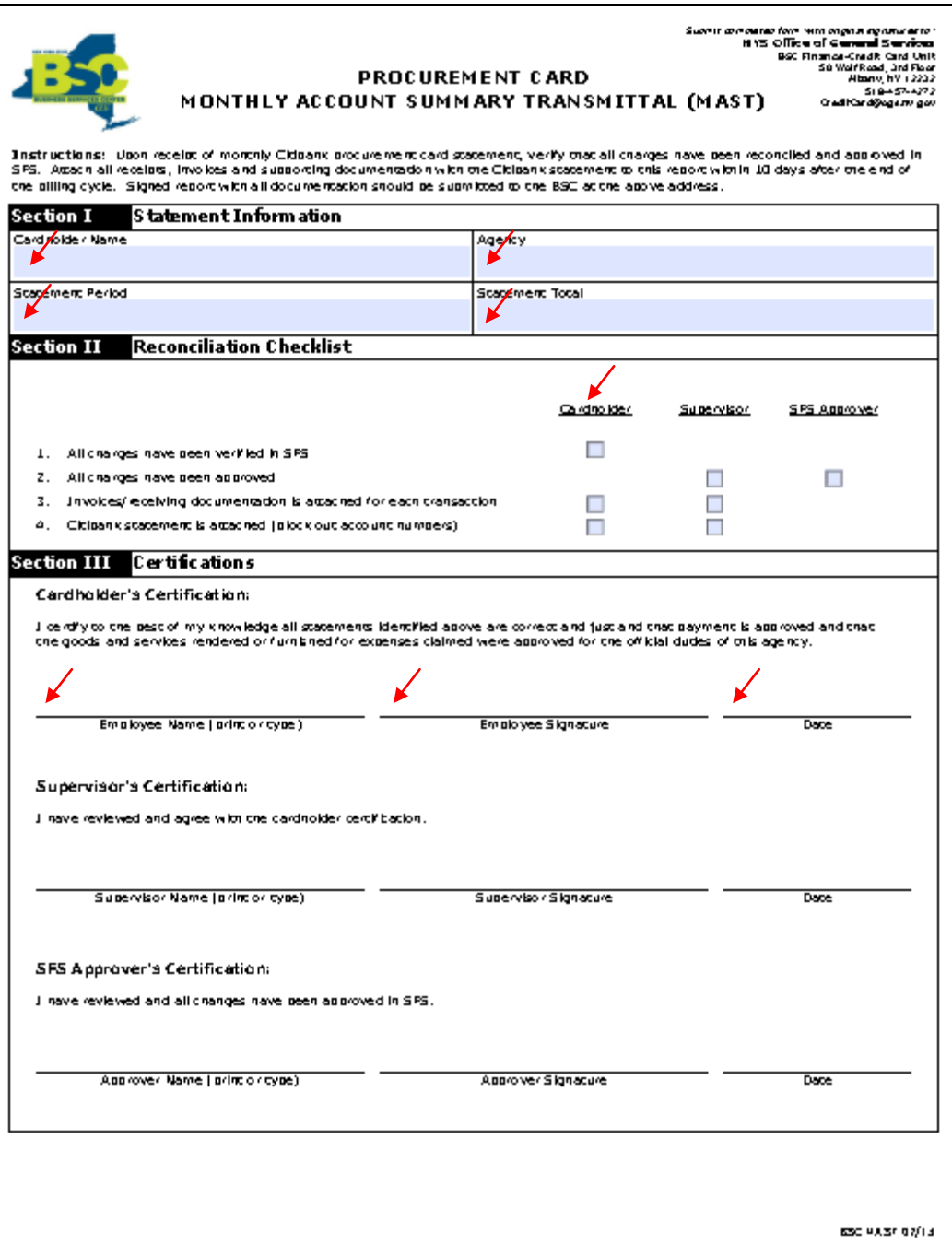
Download the Procurement Card Monthly Account Summary Transmittal Statement Form. It is a fillable PDF.



Fill in your **Cardholder Name** and **Agency.** The **Statement Period** is the time period the charges accrued for this statement, e.g. April 7, 2013 – May 6, 2013. **Statement Total** is the **Total Amount of Memo Item(s)** located after the charges on the Citibank statement.

The Cardholder must verify all charges have been verified in SFS (see *Reconciling a Procurement Card Transaction in SFS*), documentation has been attached for each transaction, and the Citibank statement is attached. The certification must also be signed and dated.

The Cardholder forwards the package to the Supervisor.



Submit completed form with original signatures to:
NYS Office of General Services
BSC Finance-Credit Card Unit
50 Wolf Road, 3rd Floor
Albany, NY 12232
518-457-4272
creditcard@ogs.ny.gov

PROCUREMENT CARD
MONTHLY ACCOUNT SUMMARY TRANSMITTAL (MAST)

Instructions: Upon receipt of monthly Citibank procurement card statement, verify that all charges have been reconciled and approved in SFS. Attach all receipts, invoices and supporting documentation with the Citibank statement to this report within 10 days after the end of the billing cycle. Signed report with all documentation should be submitted to the BSC at the above address.

Section I **Statement Information**

Cardholder Name	Agency
Statement Period	Statement Total

Section II **Reconciliation Checklist**

	Cardholder	Supervisor	SFS Approver
1. All charges have been verified in SFS	☐		
2. All charges have been approved		☐	☐
3. Invoices/receiving documentation is attached for each transaction	☐	☐	
4. Citibank statement is attached (block out account numbers)	☐	☐	

Section III **Certifications**

Cardholder's Certification:

I certify to the best of my knowledge all statements identified above are correct and just and that payment is approved and that the goods and services rendered or furnished for expenses claimed were approved for the official duties of this agency.

Employee Name (print or type) | Employee Signature | Date

Supervisor's Certification:

I have reviewed and agree with the cardholder certification.

Supervisor Name (print or type) | Supervisor Signature | Date

SFS Approver's Certification:

I have reviewed and all charges have been approved in SFS.

Approver Name (print or type) | Approver Signature | Date

BSC MAST 07/13

The Supervisor and SFS Approver (SFS Approver may also be the Supervisor) must verify all charges have been approved in SFS (see *Approving a Procurement Card Transaction in SFS*), documentation has been attached, and the Citibank statement is attached. They must also sign the certification.

Once complete mail or email the entire package.

Mail to the BSC at:
NYS Office of General Services
BSC Finance – Credit Card Unit
50 Wolf Road, 3rd Floor
Albany, NY 12232
(518) 457-4272

OR

Scan the complete package and email to the BSC at: creditcard@ogs.ny.gov. Note in the subject line: MAST Form.

Submit completed form with original signatures to:
NYS Office of General Services
BSC Finance-Credit Card Unit
50 Wolf Road, 3rd Floor
Albany, NY 12232
518-457-4272
creditcard@ogs.ny.gov

PROCUREMENT CARD
MONTHLY ACCOUNT SUMMARY TRANSMITTAL (MAST)

Instructions: Upon receipt of monthly Citibank procurement card statement, verify that all charges have been reconciled and approved in SFS. Attach all receipts, invoices and supporting documentation with the Citibank statement to this report within 10 days after the end of the billing cycle. Signed report with all documentation should be submitted to the BSC at the above address.

Section I Statement Information

Cardholder Name	Agency
John Doe	OGS
Statement Period	**Statement Total**
07/07/13 - 08/06/13	$13,567.89

Section II Reconciliation Checklist

	Cardholder	Supervisor	SFS Approver
1. All charges have been verified in SFS	☒		
2. All charges have been approved		☐	☐
3. Invoices/receiving documentation is attached for each transaction	☒	☐	
4. Citibank statement is attached (block out account numbers)	☒	☐	

Section III Certifications

Cardholder's Certification:

I certify to the best of my knowledge all statements identified above are correct and just and that payment is approved and that the goods and services rendered or furnished for expenses claimed were approved for the official duties of this agency.

John Doe	*John Doe*	08/09/13
Employee Name (print or type)	Employee Signature	Date

Supervisor's Certification:

I have reviewed and agree with the cardholder certification.

Supervisor Name (print or type)	Supervisor Signature	Date

SFS Approver's Certification:

I have reviewed and all changes have been approved in SFS.

Approver Name (print or type)	Approver Signature	Date

BSC MAST 07/13