

USDA-RD  
Form RD 3560-64  
(02-05) **MFH PAYMENT CERTIFICATION AND DISCREPANCY MONITORING LOG**

Employee Name <b>(1)</b>			Location <b>(2)</b>					
Identification <b>(3)</b>		Initial Certification Date <b>(4)</b>		Page ____ of ____ <b>(5)</b>				
TRAINING DATE: <b>(6)</b>								
TRAINER NAME: <b>(7)</b>								
MONITORING								
DATE	SOURCE	RESULT	VIOLATION			ACTION TAKEN	COMMENTS	REVIEWER'S INITIALS
			DATE	TYPE	OCCURRENCE			
<b>(8)</b>	<b>(9)</b>	<b>(10)</b>	<b>(11)</b>	<b>(12)</b>	<b>(13)</b>	<b>(14)</b>	<b>(15)</b>	<b>(16)</b>

PROCEDURE FOR PREPARATION : 7 CFR part 3560 and HB-3-3560.

PREPARED BY : State Office AMAS Coordinator.

NUMBER OF COPIES : One copy for each employee certified to enter payments on-line in AMAS.

SIGNATURES REQUIRED : None.

DISTRIBUTION COPIES : Original retained in the State Office.

## INSTRUCTIONS FOR PREPARATION

### Form RD 3560-64 “MFH PAYMENT CERTIFICATION AND DISCREPANCY MONITORING LOG” (State Office)

- (1) Enter the name of the employee being monitored. A separate form should be prepared for each employee when it is determined that a certification will be issued and Handbook Letter 3## is issued.
- (2) Enter Area Office Number and Location. For a State Office employee, enter State Office, State Name and Location.
- (3) Enter the Identification Number assigned by the Security Officer.
- (4) Enter the date the State Director signs Handbook Letter 3##.
- (5) When multiple pages are needed, enter the page number and the total number of pages associated with this Identification Number.
- (6) Enter the initial training date associated with the initial certification. When following-up training is performed, enter the date(s) of the following-up training. Annotate the type of training.
  - I - Initial training for certification
  - R- Routine following-up training
  - C- Corrective training in response to specific non-performance identified during monitoring
- (7) Enter the first initial and last name of the trainer and initials of the trainer’s position.
- (8) Enter the date of the monitoring transaction, such as:
  - Date Pending was accessed
  - Date Inquiry or History screens were accessed
  - Date of incorrect payment processing due to employee error
  - Date of FOCUS AM17 - PROJECT TRACKING INQUIRY REPORT
- (9) Enter the source of the monitoring transaction, such as report code, inquiry screen number, Pending, etc.
- (10) Annotate that there was “No exception” or, if there was an exception, annotate the specific cause such as “ Out-of-Balance 3 days” etc., until five days is reached and an exception is recorded, “Funds held more than 3 days”, etc.
- (11) Enter the specific date of the out-of-balance block, call date for payments held more than 3 days, etc.
- (12) Enter this type of violation as follows:
  - IPP-Incorrect Payment Processing
  - EXR- Exception Report Violation
- (13) Enter whether this is the first, second, third or fourth occurrence of any type of transaction within a twelve month interval which could lead to withdrawal of certification.
- (14) Enter the type of action taken, such as, letter to State Director, follow-up training, etc.
- (15) Enter any appropriate comments, follow-up activity, etc. regarding this monitoring transaction.
- (16) Enter the initials of the person performing the monitoring transaction.