

**ANNEX 2**

**SAMPLE 61 DAY DELINQUENCY MEMORANDUM (IBA)**

MEMORANDUM FOR (NAME OF CARDHOLDER’S IMMEDIATE SUPERVISOR)

SUBJECT: Delinquent Government Travel Charge Card Payment Notification - 61 Days

We have been informed by the Government Travel Charge Card (GTCC) contractor that \_\_\_\_\_ (cardholder's name) is 61 days delinquent in payment of his/her account. The total amount due is \$\_\_\_\_\_. The account is subject to a \$29 late fee at the point the account becomes 75 days delinquent and an additional \$29 late fee for each subsequent billing cycle until the delinquency is resolved.

(Provide the specific information regarding the delinquent charges.)

The GTCC contract requires that all outstanding, undisputed charges be paid by the due date specified on the billing statement. The GTCC contractor has suspended card privileges for this cardholder due to non-payment. The cardholder is required to be notified of this action and counseled concerning the non-payment and use of the GTCC. Cardholders on temporary duty more than 45 days are required to submit travel vouchers for payment every 30 days and maintain their GTCC account in a current status. 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 applicable.

Non-compliance, or failure to adhere to the guidelines for the GTCC, may result in disciplinary action in accordance with applicable statutory, regulatory, or contractual provisions and applicable Multi-Unit Master Agreement for bargaining unit employees.

The delinquent balance may be resolved by one of the following actions: (1) payment in full; (2) a reasonable explanation documented and submitted to the contractor through the Agency Program Coordinator (APC); or (3) an agreed upon repayment schedule with the GTCC contractor. Billing questions may be directed to the GTCC contractor at the number printed on the billing statement for that purpose. Questions concerning the GTCC program may be directed to \_\_\_\_\_ (APC’s name) at \_\_\_\_\_ (telephone number).

Please have the cardholder sign below to acknowledge receipt of this delinquent notification and return it to me with your written response, outlining the actions taken, within 5 business days.

Signature  
Agency Program Coordinator

cc: Cardholder

I acknowledge receipt of this memorandum.

\_\_\_\_\_  
(Name, Grade, Organization)

\_\_\_\_\_  
(Date)