

MEMORANDUM FOR **(Insert name of individual being appointed)**

Subj: APPOINTMENT AS ACCOUNTABLE OFFICIAL

You presently occupy a position wherein your duties include the functions of an accountable official. This memorandum is formal notification that you are hereby appointed as an accountable official to **(Note: insert name, location and address of the supported Approving Official/Certifying Officer to whom certification will be made)**.

As a purchase card program accountable official, you will be accountable and pecuniarily liable for any erroneous payments that result from inaccurate information and data, including designation of the proper appropriations or other funds provided to a certifying officer, if the erroneous payment is the result of negligence relative to the performance of assigned accountable official duties. Pecuniary liability includes responsibility for erroneous payments that result from information, data, or service that was negligently provided to the certifying officer.

In addition, you must become thoroughly familiar with your responsibilities and accountability. Volume 5, Chapter 33, of the DoD Financial Management Regulation provides a description of your responsibilities and pecuniary liability as an accountable official. You should read and become thoroughly familiar with these responsibilities and liability. After completion, you must acknowledge this appointment and that you have read and understand your responsibilities and liability by signature on the space provided on the acknowledgement provided on the next page.

(Signature of Approving Official)

ACKNOWLEDGMENT

In accordance with this memorandum, I hereby execute the following statement:

"By signature hereon, I acknowledge my appointment as an accountable official. I have read and understand my responsibilities and pecuniary liability as described in Volume 5, Chapter 33, of the DoD Financial Management Regulation. I understand that I have the right to request relief of liability for any certification I supported that is determined to be an illegal, improper, or incorrect payment. I further understand that this appointment will remain in effect until I am transferred, separated for any reason, or retire from service."

(Signature of Accountable Official)