**AUDIO CONFERENCING ACCOUNT REQUEST**

*(USAID/W Only)*

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| Name *(Proposed card user)*: | Bureau/Office/Division/Branch | USAID/W work location: | |
| USAID e-mail Address: | Phone number: | Date Card is Needed | |
| I confirm that I am a USAID/W Direct Hire employee, and that this audio conferencing account is to be used ONLY for authorized government conference calls. I understand that the account should not be shared with anyone. I agree to notify M/CIO/ITO/IO and my Bureau Management Office immediately if, 1) the host account number is shared, compromised, lost or stolen, or 2) I no longer have a need for the audio conferencing service. When requested, I agree to review and verify all conference calls charged to my account for invoice purposes. I have read the Agency’s policy on audio conference calls in ADS 549 and understand that failure to follow it may result in cancellation of the card and other appropriate penalties. I understand that my account is only to be used to support my USAID/W organization, and I agree to notify M/CIO/ITO/IO if I am no longer assigned to USAID/W. | | | |
| Requester’s Signature | | | Date: |

I confirm that the requesting person is a USAID/W Direct Hire who needs an audio conferencing account to set up audio conference calls for our USAID/W Bureau or Independent Office. I understand that CIO’s plans to collect reimbursements from B/IOs based on their utilization of this service.  Typical charges will be based on $0.02/minute times the number of people on the call.  So each 10 minute conference call with 10 people would cost $2, and I understand the costs will vary accordingly with the number of calls, the length of the calls and the number of callers.

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| AMS Officer’s Name | Bureau/Office |
| AMS Officer’s Signature: | Date: |

AID 549-1 (5/2017)