



Employee/Supervisor: Sign and submit form to your Agency Liaison for review and approval.

Agency Liaison: Submit approved forms with original signatures to:

BSC Finance: Credit Card Unit

1220 Washington Ave.

Building 5

Albany, NY 12226-1900

Email: BSC.CC.Applications@ogs.ny.gov

Phone: 518-457-4272 Fax: 518-485-7047

New Traveler/Travel Card Application (page 1)

Section 1: Employee Information

First Name	MI	Last Name	Title/Department		
Agency GLBU		Employee ID Number (can be found on pay stub)		SFS User ID (if known, otherwise use NYSDS/SLMS user id)	
Work Address (full mailing address)					
Official Station - Street Address/ 5 digit zip code					
Email Address		Cell Ph # (Card Activation)	Require a Citibank Travel Credit Card?		Last 4 SS Number
		- -	Yes No		

Your use of a NYS Citibank Travel Card is subject to the following term and conditions:

1. You are being entrusted with a valuable tool - a NYS Citibank Travel Card - which is to be used for business travel expenses. Because you will be making a financial commitment on behalf of the State, you must strive to obtain best value for the State by following established travel policies as appropriate.
2. All charges made to your credit card will be posted to a central bill by Citibank. You will not receive a bill from Citibank (although you may view your monthly statement of charges on line at: <https://home.cards.citidirect.com/CommercialCard/Cards.html>). It is important that you submit your expense report promptly in order for all charges to be reconciled. Failure to submit your expense reports in a timely manner may result in revocation of your travel card.
3. You may use the travel card to pay for travel expenses when you are on official State Business for authorized State transactions only. You may not use this credit card for personal charges. Your agency and the Office of the State Comptroller will audit the use of your card and take appropriate action on any discrepancies or unauthorized charges. Any evidence that your card has been used fraudulently will require an investigation, after which disciplinary action may result. Fraudulent use may also result in criminal prosecution.
4. You must follow the policies and procedures established by New York State for the use of this credit card. Failure to do so may result in revocation of your user privileges or other disciplinary action, which could include termination of employment.
5. NYS Citibank Travel Cards are the property of New York State. You must return your card immediately upon request or upon termination of employment or retirement. Should there be any change in your employment status you must return this card and arrange to have a new card issued, if necessary.
6. If this credit card is lost or stolen, you must notify Citibank immediately at: 1-800-790-7206.
7. You must comply with any changes to the terms and conditions or policies and procedures concerning use of this credit card.

When your card arrives, it will be mailed to your work address.

As the employee applying for this card, I have read and understand these terms and conditions.

Employee Signature

Date



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New Traveler/Travel Card Application (page 2)

Section 2: Completed by Proxy (if applicable)

First Name	MI	Last Name	Email Address	Proxy Employee ID #

Proxy Signature

Date

Section 3: Completed by Supervisor/Approver

First Name	MI	Last Name	Email Address	Supervisor Employee ID #

Supervisor Signature

Date

Section 4: Completed by Agency Liaison to the BSC

Cardholder Default Accounting Distribution (Chartfield)

Business Unit Department Code Program Fund Account Operating Unit Chartfield 1 Chartfield 2

Budget Reference PC Business Unit Project ID Activity ID

Budget Signature (if applicable)

Citibank (if applicable)

Hierarchy 1 Hierarchy 2 Hierarchy 3 Hierarchy 4 Hierarchy 5 Hierarchy 6 Hierarchy 7

10646

Agency Liaison to the BSC's Name

Agency Liaison to the BSC's Signature

Date