

**JUSTIFICATION FOR NON-COMPLIANCE  
WITH MANAGEMENT MEMO (MM) 08-08**

DGS OFAM 101 (Revised 09/2019)

Complete this form for each meeting-related invoice not paid on the Citibank Meeting Card account (MTG). E-scan a copy of the completed form to [statewidetravelprogram@dgs.ca.gov](mailto:statewidetravelprogram@dgs.ca.gov). Attach the original form(s) to the original invoice(s) and submit to the State Controller's Office for payment.

**TO:** State Controller's Office**DATE:** \_\_\_\_\_**SUBJECT:** Justification for using a payment method other than the Citibank MTG for meeting space rental and other meeting-related expenses as outlined in MM 08-08

Department Name	Contact Name	Contact Email	Phone Number
Meeting Name/Title			
Vendor Name	Email	Phone Number	
Vendor Address	City	State	Zip Code
Date of Service	Total Charges \$		

**REASON FOR NON-COMPLIANCE**

Vendor does not accept credit cards for payment

Vendor does not accept the Citibank MTG

This Department does not have a Citibank MTG

This Department is in the process of setting up a Citibank MTG

Program Manager/Accounting Supervisor Name	Signature	Date	Phone Number
--	-----------	------	--------------