



Department Fact Sheet



Entity Name: _____

Main Address: _____

City, State and Zip: _____

Travel Administrator/Travel Coordinator Contact

Name: _____

Telephone Number: _____

Email Address: _____

Manager Contact

Name: _____

Telephone Number: _____

Email Address: _____

Accounting/Reports/Reconciliation Contact (Citibank Program Administrator)

Name: _____

Telephone: _____

Email: _____

Domain Names:

i.e., @k12.ca.gov; list all if more than one applies.

Email Domain Name: _____

Website URL: _____

Accounting/Billing Description:

If applicable; i.e. project code, bill code, GL code, department number, etc.

Additional Office Locations:

If applicable; please list complete addresses, attach additional pages, if necessary.

Other Travel Requirements:

If applicable; i.e. travel policy, customization, pre-trip approval, etc. Please note if you are using any Concur products (Expense, Travel, Request, etc).

Forward completed form to kenneth.wong@dgs.ca.gov

Internal Use Only: DK# _____