

NEW YORK STATE CITIBANK INDIVIDUAL TRAVEL ACCOUNT ACKNOWLEDGMENT FORM

The use of a **NYS Citibank Individual Travel Account (ITA)** is subject to the following terms and conditions:

1. The NYS Citibank Individual Travel Account is to be used only for business travel expenses for Airfare and Amtrak. 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.
2. All charges made to your Individual Travel Account (ITA) will be posted to a central bill by Citibank and sent to the Procurement office for payment. You will not receive a paper bill.
3. When on Official State Business you may only use this Individual Travel Account for Airfare and Amtrak tickets purchased through the current State contracted Travel Agency, Euro Lloyd. You may **not** use your Individual Travel Account for personal charges or to book any other employee's or Non-employee's travel. Your agency and the Office of the State Comptroller will audit the use of your account and take appropriate action on any discrepancies or unauthorized charges.
4. You must follow the policies and procedures established by New York State and Stony Brook University for the use of the Citibank Individual Travel Account. 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 Individual Travel Accounts are the property of New York State. You must notify the Account Program Administrator when there is a change in account holder information, such as department, supervisor, default account number or termination of employment.
6. You must comply with any changes to the terms and conditions or policies and procedures concerning use of this Individual Travel Account (ITA).

I have requested a Citibank Individual Travel Account to be issued in my name.

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

Account Holder Signature: _____ **Date:** _____

Return completed form to Porshia Russell, Procurement Z - 6000