

FINANCIAL OPERATIONS

Shuster Hall, Room 012 250 Bedford Park Blvd West Bronx, NY 10468 Phone: 718-960-8245 Fax: 718-960-8333 www.lehman.edu

New Update Re	emove						
CITIBANK Travel Card Application							
The following information is needed in order to apply for a Citibank Travel Card.							
Applicant Information							
Prefix First Name			iddle Initial Last Name				
Last 4 digits of your Social Security Number EMPLID				*Last eight digits of your CUNY Employee ID Card			
Billing Information							
Statement Billing Address (line 1) Statement Billing Address (line 2)							
250 Bedford Park Blvd West							
City/APO State/ Provi			ovidence Zip Code				
Bronx New Y		York			10468		
Business Phone Number & Extension	Business Fax Number	<u>E</u>	mail Address				
Requested per transaction limit	Requested monthly maximum	า					
\$1,500	\$2,000						
• Authorizations							
Signature of Applicant		Date	Date Department Name and 5 digit CL		partment Name and 5 digit CUN	lYfirst dept. number	
Supervisor Name		Supervisor	Supervisor Signature			Date	
Name of Approving Vice President or Dean		Signature of Approving Vice President or Dean			Date		

^{*}This number refers to the last eight numbers of your employee ID located on the bottom of your Lehman College ID which start with "00"