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STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF FLEET ASSET MANAGEMENT

# Proxy Booking Form

## State of CA signup for SWABIZ Proxy Booking Rights

| | | | |
|---|---|---|---|
| **Dept./Agency Name:** | | **SWABIZ Company ID (CID):** | |
| **Travel Coordinator Name:** | | **Travel Coordinator Email:** | |

Please fill out the information below to sign up secretaries, administrative staff, and other employees in your department, or **State-certified travel agencies** who will be booking travel for others. Southwest will designate these people as Travel Managers with Proxy booking rights only. They will be able to book reservations for themselves and others but will not have access to your department's travel reports, travel policy or ghost card (BTA) management.

| Name | Phone Number | Fax Number | Email Address |
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**Please email this form to Michelle Nakata, michelle.nakata@wnco.com**