

**CUSTOMER ACCOUNT NUMBER (CAN) REQUEST**  
 AFS-94A (REV 7/25/2012)

**INSTRUCTIONS for (1) ACTION**

- A - Add New CAN. Columns 1, 3, 4 are required.
- M - Modification in unit name and/or address. Columns 1,2,4 are required.
- I - Inactivate CAN. Columns 1,2,4 are required.

**MAIL TO:**

Department of General Services  
 SRF Fiscal Services (IMS Code Z-1)  
 707 Third Street, 10th Floor  
 West Sacramento CA 95605  
 FAX TO: (916) 376-5165  
 E-mail to: [SRFFiscalServices@dgs.ca.gov](mailto:SRFFiscalServices@dgs.ca.gov)

**FROM:**

(1) ACTION	CUSTOMER ACCOUNT NUMBER (CAN)	
Circle one:	(2) CURRENT #	(3) NEW #
A M I		

**(4) BILL TO ADDRESS has limitations:  
 5 LINES & 25 CHARACTERS MAXIMUM PER LINE**

Agency Name (1) \_\_\_\_\_

Unit Name (2) \_\_\_\_\_

Address (3) \_\_\_\_\_

(4) \_\_\_\_\_

City / State / Zip (5) \_\_\_\_\_

**Justification required for EFT customers requesting CANs with same appropriation as an existing CAN:**

State - Interagency Messenger Service (IMS) Code:

Check **ONLY 1** of the following boxes that best describes your organization:

- State Government
- Fi\$Cal Agency, if yes, check this box and complete below.  
Inter-Unit Agency, PeopleSoft Chartfield Accounts  
 FY-Appropriation Ref-Fund-Acct-Alt Acct-Program  
 \_\_\_\_\_
- Private Entity
- School District (Public, Private, Superintendent)
- Local Government (Cities, Counties, Other States, & Districts)
- Federal Government

**TO BE COMPLETED BY STATE AGENCY REQUESTING CHANGE FOR ELECTRONIC FUND TRANSFER PAYMENT ONLY:**

CONTROLLER'S ACCOUNT #: \_\_\_\_\_

Print name of requesting person	Title	Date
Approved by	Title	Date
Address		
E-Mail Address	Fax Number	Phone Number