

State of California
Financial Information System for California (FI\$Cal)
GOVERNMENT AGENCY TAXPAYER ID FORM

2000 Evergreen Street, Suite 215
Sacramento, CA 95815
www.fiscal.ca.gov
1-855-347-2250



The principal purpose of the information provided is to establish the unique identification of the government entity.

Instructions: You may submit one form for the principal government agency and all subsidiaries sharing the same TIN. Subsidiaries with a different TIN must submit a separate form. Fields marked with an asterisk (*) are required. Hover over fields to view help information. Please print the form to sign prior to submittal. You may email the form to: vendors@fiscal.ca.gov, or fax it to (916) 576-5200, or mail it to the address above.

Principal
Government
Agency Name*

City and County of San Francisco

Remit-To
Address (Street
or PO Box)*

CCSF Sacramento Lockbox, P.O. Box 103122

City*

Pasadena

State * CA

Zip Code*+4 91189-3122

Government Type:

☒ City

☒ County

☐ Special District

☐ Federal

☐ Other (Specify)

Federal
Employer
Identification
Number
(FEIN)*

94-6000417

List other subsidiary Departments, Divisions or Units under your principal agency's jurisdiction who share the same FEIN and receives payment from the State of California.

Dept/Division/Unit
Name

SF Human Services Agency, F210

Complete
Address

PO Box 7988, San Francisco, CA 94120

Dept/Division/Unit
Name

Complete
Address

Dept/Division/Unit
Name

Complete
Address

Dept/Division/Unit
Name

Complete
Address

Contact Person*

Heather Davis

Title

SFHSA Revenue Manager

Phone number*

415-557-5542

E-mail address

heather.davis@sfgov.org

Signature*

Heather Davis

Date

8/22/2025