

The University of Tennessee
Procurement Card Program

Card Notification Form

This form must be completed in the event a card is lost, stolen, or compromised.

CARD WAS:

LOST

STOLEN

COMPROMISED

OTHER (Describe)

Date card was lost, stolen, or compromised.

Cardholder Name: _____

Card Number: _____
Last 6 digits only

Bank of America Notified: (1-888-449-2273) _____
Date

Time

Name of Bank of America Employee: _____

Should a replacement card be issued?

Yes

No

Cardholder Signature

Date

Department Head Signature

Date

NOTE: When completed, fax this form to the Program Administrator at (865) 974-2701.