

Boston College

Lost or Stolen Purchasing Card Notification

Please advise your departmental P2 to deactivate your card using the PeopleSoft system, then complete this form and send it to the bank with a copy to purchasing@bc.edu.

Card was:

_____ lost
_____ stolen
_____ other (describe) _____

Cardholder Name: _____

Cardholder Department Name: _____

Card Number: _____

Date called in to US Bank: _____

Time called in: _____

Called in by (person at BC): _____

Called in to (person at US Bank): _____

Cardholder's Signature _____ Date: _____

Print Cardholder's Name: _____

For Bank Use Only:

Approved by: _____ Date: _____

Please send this form to:

U.S. Bank
C/O FBS Card Services, Inc.
Mail Code FBTT0202
1010 South Seventh Street
Minneapolis, MN 55415
Attn.: Contract Administrator