

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.