ARKANSAS TECH UNIVERSITY

LOST OR STOLEN P-CARD

Russellville, AR 72801-2222		Fax: 479-968-0269
Date:		
From:	Cardholder Name:	
	Department:	
	Cardholder Phone No:	
	Last 4 Digits of Card No:	
Please ch	neck one: Card is believed to be stolen	lost
·	scribe circumstances of loss or theft:	
	er Signature:	
Infor	mation on telephone notice to VISA and US BANK CI	USTOMER SERVICE
Date Noti	ified: Time Notifie	d:
Name of '	VISA Employee:(1-800-VISA911)	
Name of	US Bank Employee:	

If loss or theft was discovered during normal business hours, notify the ATU Purchasing Department IMMEDIATELY. We will call both VISA and US Bank.

If not during normal business hours, **you must notify them as soon as possible**, and report the loss to ATU Purchasing and your immediate supervisor.