

The University of Alabama in Huntsville Procurement Card Termination Form

Department Name:	Date:
Submitted By:	Email:
Cardholder	
Name:	Last 4 digits of Card:
Reconciler	
Name:	
Email:	
By signing I certify that all outstanding transactions of the all supporting documentation for the transactions have be	
Reconciler's Signature:	Date:
Approving Official	
Name:	
Signature:	Date:
Forward completed form to Procure	ement Card Services Department for processing.
Procurement Card Services Official:	Date: