



# 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 cardholder has been appropriately allocated and all supporting documentation for the transactions have been provided to Procurement Card Services.

Reconciler's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Approving Official

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Forward completed form to Procurement Card Services Department for processing.

Procurement Card Services Official: \_\_\_\_\_ Date: \_\_\_\_\_