

**Procurement Services Division  
Credit Card Unit  
8525 Rex Rd., Pico Rivera, CA 90660  
Main Line: (562) 654-9401 Fax: (562) 654-9048**

**Declaration of Unauthorized/Fraudulent Use**

1. Indicate the name on the card that was lost/stolen:

2. Please check the statement that applies to your situation:

**My Card was:**

Lost  Stolen:

Date card was lost or stolen:

I have unauthorized transactions, but my card is in my possession.

**3. THE TRANSACTION(S) LISTED BELOW ARE UNAUTHORIZED/FRAUDULENT.**

**Disputed Transactions:**

Date	Document Number	Merchant Name	Amount

Please sign and date below:

\_\_\_\_\_

Cardholder Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Approving Official Signature

\_\_\_\_\_

Date

**Please upload the completed form to the unauthorized/fraudulent transaction(s) in SAP.**