

**University of Louisville
Department of Purchasing
Fuel Card Certificate of Destruction**

This document certifies that the fuel card listed below or the attached list of cards has/have been destroyed.

Department Name _____

Comdata Customer ID No. _____

Fuel Card # _____

Card Expiration Date _____ License Plate # _____

Reason for Destruction _____

I certify that I destroyed the above referenced fuel card, or the fuel cards on the attached list, today.

Signature of Person Who Destroyed Card

Date

I certify that I witnessed the destruction of the referenced fuel card(s) today.

Signature of Witness

Signature of: UBM, Department Head, **OR** Department Chair

Please forward completed form to:

Alma Brandon
Procurement Card Program
Inventory Control Bldg.
1901 So. Floyd St.

DO NOT SEND THE DESTROYED CARD TO THE DEPT. OF PURCHASING