_____
_____
_____

_____

_____
_____
_____

Dear Sir or Madam:

This letter serves as written confirmation of my previous contact on _____, to cancel the following credit card(s) in my name because it has been lost:

Card name: _____
Account number: _____
Expiration Date: _____

Please issue me a replacement card for this account.

My credit card was lost on _____. Please inform me of any charges made to my account on or after _____.

Please contact me at the address given above if you have any questions or need additional information. I can be contacted by phone at _____.

Thank you for your help in handling this matter.

Sincerely,

_____

FREE PRINTABLE LEGAL FORMS.com