



Government Services  
Cardholder maintenance form  
**Travel**

Account Unique ID or Cardholder Account ID: _____			
Select one: 3059 (Visa) 8203 (Mastercard)	Change: Move to a new managing account: Company Number: _____ Reissue card	Closure: Please select type of closure, if applicable: T9 Permanent V9 Temporary	Please fax all pages to: 701-461-3466 or 866-457-7506 Or mail request to: U.S. Bank Government Services PO BOX 6347, Fargo, N EMC 6 (4)- 0.1
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