



Replacement Card Request Form

Instructions: Please fill out, sign and return this form via fax @ 860-295-0340 or via email with a scanned signature to the following email: **eebenereim@diversifiedgb.com**. If you have problems or questions, please call 1-800-423-5573.

Employee Name: _____

Employee SSN: _____

Employer Name: _____

Card Lost/Stolen, please explain?

Employee Signature: _____ Date: _____

A **\$10.00** charge for each additional card you request will be deducted from your Account.