



Duplicating Mail Service Form

Postal Code

Area/Categorical

Date

Number of Items Submitted

Requestor

Phone

Dean/Supervisor Approval

Budget Code

5810

BU

Acct

Fd

Org

Prog

Sub

Proj

Outgoing mail must have Division or Department Title in return address.

This form must be submitted with mailings over 25 pieces.

*Duplicating Department Use only

Postage \$ _____

Automated Total _____