

Special Metered Mail Request Form –(For Other Than First Class Use Only)

Department Name: _____

Dept ID: _____ **Proj/Grant** _____

Date: _____

I. Domestic

___ Express Mail*

___ Priority Mail

___ Certified*

___ Media Rate

___ Parcel Post

___ Single Piece Media

___ Library Media

II. International

___ Express Mail*

___ 1st Class Airmail

*Forms required, please contact Mail Services @ x66671 if you need forms

III. Stamps

___ Domestic (rolls)

Telephone Extension _____ Authorized Signature _____