

STAMP AND/OR POSTCARD REQUISITION

Date: _____

This is to request that _____
(Department and account number)

be issued _____
(Description)

Purpose: _____

It is understood that the above will be used for official University business only, and is to be charged to the above account.

AUTHORIZED SIGNATURES:

Customer

Approved: _____
Print & Mail Services staff

MAIL SERVICES USE ONLY:

Date Issued: _____

Issued by: _____

Received by: _____