

## Rollins College Campus Post Office – Postage Request Form

Department Name \_\_\_\_\_ Fund/Org number: \_\_\_\_\_ Date: \_\_\_\_\_

<input type="checkbox"/> 1 <sup>st</sup> Class Mail	<input type="checkbox"/> Certified Mail (signature upon delivery)
<input type="checkbox"/> Priority Mail (2-3 days, not guaranteed)	<input type="checkbox"/> Return Receipt (only with certified mail)
<input type="checkbox"/> Retail Ground (packages only)	<input type="checkbox"/> Insured Mail (Value of contents _____)
<input type="checkbox"/> Media Mail (Books, media items only)	<input type="checkbox"/> Library Mail (For OLIN LIBRARY <b>ONLY</b> )
<input type="checkbox"/> Express Mail (Overnight, guaranteed)	Purchase Postage Stamps
<input type="checkbox"/> International Mail (16oz or more requires custom form***)	_____ Coils(100) _____ Sheets (20)

\* Please separate **INTERNATIONAL MAIL** from **DOMESTIC MAIL**

\*\* For **BULK MAIL** info - contact Print Services Ext. 1513 or Campus Post Office Ext. 2535

\*\*\* **Custom forms** must be completed on line at USPS.com prior to mailing, signature required on form

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