MAIL CENTER INFORMATION

This form **MUST BE COMPLETED** for **ALL** mail outs: Mail or Carrier Services.

DATE SUBMITTED: ______________________

SITE: ____________________________________  WAREHOUSE #: ______________________________

CONTACT PERSON: ______________________  TELEPHONE #: ________________________________

ORGANIZATION OR CLUB: ________________________________
(Ex: PTA, Drama, Athletics)

BRIEF DESCRIPTION OF MAIL: ________________________________
(Ex: Grad Night, Report Cards, Dance) **Attach a copy of your flyer to this sheet**

I authorize this mail to be sent:

- [ ] First Class  _______Total Pieces
- [ ] First Class Pre-Sort  _______Total Pieces
  (500 or more pieces must be in Zip Code sequence)
- [ ] Bulk Mail  _______Total Pieces
  (200 or more pieces must be in Zip Code sequence)
- [ ] Certified  _______Total Pieces
  (Complete form for each piece)
- [ ] Postcards  _______Total Pieces
- [ ] International Mail  _______Total Pieces
  (Must always fill out mail form)

**Choose one Carrier***

- [ ] FEDEX  _______UPS  _______USPS

**Choose one Service***

- [ ] Ground  _______Next Day

- _______Total Pieces

________________________

TO BE COMPLETED MY MAIL CENTER

Date Mailed: __________________________

Total Pieces: _________________________

Cost of Mailing: ________________________

Processed by: _________________________

***DO NOT MODIFY THIS FORM***

Revised: 8/15/17