



MACON & JOAN BROCK  
**VIRGINIA HEALTH SCIENCES**  
AT OLD DOMINION UNIVERSITY

## POSTAGE CHARGE AUTHORIZATION FORM

<b>NAME:</b>	
<b>DEPARTMENT:</b>	
<b>BUDGET CODE:</b>	
<b>DATE:</b>	
<b>PHONE:</b>	
	<b>TOTAL NUMBER OF PIECES</b>
<input type="checkbox"/> Letters	
<input type="checkbox"/> Flats (Large Envelopes)	
<input type="checkbox"/> Post Cards	
<b>SPECIAL SERVICES</b>	
<input type="checkbox"/> Certified	
<input type="checkbox"/> Return Receipt	
<input type="checkbox"/> Insured	
<input type="checkbox"/> Signature Confirmation	
<input type="checkbox"/> Express Mail	
<input type="checkbox"/> Packages (Need USPS Tracking Label)	
<input type="checkbox"/> Priority Mail	
<input type="checkbox"/> International Mail	

### FOR MAIL SERVICES USE:

<b>Processing Mail Clerk Initials:</b>	<b>Date Received/Processed:</b>
<b>Total Number of Pieces Processed:</b>	<b>Total Postage Charged:</b>