

METERED MAIL

METERED MAIL

Department _____

Account Number _____

Department _____

Account Number _____

Phone Extension _____

Phone Extension _____

CLASS:

CLASS:

1st _____

1st _____

Other _____

Other _____

Print Name _____

Print Name _____

Signature _____

Signature _____

This form must be completed and affixed to each piece or bundle to be metered. Mail will not be metered without this completed form.

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