



## Please fax a copy of this form to the Business Services Department at 926-4089 and forward the original with the mail. <u>The use of bulk mail is prohibited to transmit student records.</u>

Request Information							
Campus:	Campus Contact:		Request Date:				
Mail Item Information							
Item Description:		Expected De	elivery Date:				

Zip Code	Number of Items	Zip Code	Number of Items
L	Total Items:		

Below to be complete by the Business Services Department

Total Items:	X Rate:	Total Cost:
Check Number:	Check Date:	Check Issued by:
Check Approved By:		Check Date:

Approving Signature: