



**Warehouse Mail Operations**  
**MAIL PREPARATION / POSTAGE FORM**  
 For further assistance please call (850) 922-0657

LCS 9830-1014  
 REV 6/2024

Date Received \_\_\_\_\_

Site Name \_\_\_\_\_

Cost Center \_\_\_\_\_

Requested By \_\_\_\_\_

Phone Number \_\_\_\_\_

**MAIL PREPARATION INSTRUCTIONS (CHECK ALL THAT APPLY)**

**CLASS OF MAIL**

\_\_\_\_\_ First Class

\_\_\_\_\_ Standard (*Bulk Mail– Minimum 200 Pieces*)

\_\_\_\_\_ Certified

\_\_\_\_\_ Insured

\_\_\_\_\_ Express

\_\_\_\_\_ Priority

**TYPE OF MAIL**

\_\_\_\_\_ Number Of Pieces In Mailing

\_\_\_\_\_ Postcard

\_\_\_\_\_ Newsletter

\_\_\_\_\_ Vendor Checks

\_\_\_\_\_ Payroll Checks

Special Instructions:

**WAREHOUSE MAIL OPERATIONS USE ONLY**

UNITED STATES (US) MAIL	# OF PIECES	SUBTOTAL
First Class	_____	_____
Standard Mail ( <i>Minimum 200 Pieces</i> )	_____	_____
Certified	_____	_____
Insured	_____	_____
Express	_____	_____
Priority	_____	_____
	_____	_____
	<b>Total # of Pieces</b>	<b>Postage Total</b>

Date Received \_\_\_\_\_

Date Shipped \_\_\_\_\_

Machine Operator \_\_\_\_\_

Notes: