

University Mail Services

Departmental Log for 16 oz or Greater Mail

Department Name: _____

Mail Drop Code: _____

PLEASE COMPLETE WITH SENDER'S NAME AND THE ADDRESS TO WHICH THE MAIL IS TO BE DELIVERED:

Sender	Address (Suite, Bldg, Street)	City	State	County	Zip
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

I hereby certify that each of the above listed senders is personally know to me, is an employee of the University of Tennessee and personally gave the referenced mail to me for delivery.

Print Name

Date

Signature

Carrier