

Postage Authorization Form

From: _____ **Company:** _____ **Program:** _____
(Department Name) **Division:** _____ **Financial Site:** _____
Phone #: _____ **Cost Center:** _____ **Worktag:** _____
Date: _____ **Fund:** _____ **Worktag:** _____

Each piece of mail must be identified and separated by its classification type, either Domestic or International and must have a Postage Authorization Form attached. Each type of mail will be sent as First Class Mail unless marked otherwise on the Postal Authorization Form.

PIECES	CLASSIFICATION (Prices Last Updated 14-July-2024)	UCF Postal Services Use Only	
		Actual Pieces	Postage Total
DOMESTIC MAIL TYPE:			
	First-Class: Letters - \$0.69 and up by weight		
	First-Class: Large Envelopes (Flats) \$1.50 and up by weight		
	Package Services \$5.00 and up by zone		
	Priority Mail: Letters & Packages \$9.25 and up by zone		
	Priority Flat Rate Envelope \$9.85		
	Priority Flat Rate Box (Small \$10.40)		
	Priority Flat Rate Box (Medium \$18.40)		
	Priority Flat Rate Box (Large \$24.75)		
	Priority Mail <i>Express</i> \$30.45 minimum		
	Library Rate: (Library to Library mail) \$4.40 and up by weight		
	Media Mail (See USPS Site For Rules) \$4.63 and up by weight		
	Certified With Return Receipt \$9.64 minimum		
	Post Cards: \$0.56		
	+ Signature Confirmation \$4.55 plus postage		
	+ Insured (Please indicate insurance amount on package or separate schedule – Maximum Liability \$5,000) 8.25 (plus postage) for \$500		
	+ Insured 11.00 & up depending on amount (plus postage) for over \$500		
INTERNATIONAL MAIL TYPE: Custom forms needed for all International Mail except Letters			
	First Class: Letters - \$1.65 and up		
	First Class: Large Envelopes (Flats) \$3.15 and up by weight		
	First Class: Packages \$17.00 and up by weight and by country		
	Post Cards: \$1.65		
	Priority Mail International (Limited Destinations \$42.95 and up)		

All postage charge permission forms must be signed by an authorized department representative prior to processing mail and must not include personal mail. **Please call us at extension 3-2400 with any questions on how to process your mail.**

Authorized Representative (Please Print)

Signature - Authorized Department Representative

By submission of this form I certify that the department listed has sufficient funds for this transaction and give UCF Postal Services permission to recover the required amount, regardless of the resulting departmental balance.