



CAMPUS MAIL SERVICES BARCODE REQUEST

Please complete this form for each department that will need a barcode(s) for sending mail through the campus mail system.

College/Department

Division/Program

Lease Expiration Date

Requesting new barcode(s)

Already have existing barcode(s)

MAIN CONTACT INFORMATION

Name

Phone Number

Email Address (must be a valid UH @hawaii.edu address)

Number of New Barcodes Requesting

Fiscal Officer Name

FO Number

Signature

Date

