

Send original with Department Head/Chair signature to Receiving Services,
Attn: Judy Plaxco. Also please email a copy to Judy.Plaxco@ucr.edu.

Date: _____	Department: _____
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Campus Address: _____	Signature: _____ <small>(this signature acknowledges that email address above belongs to you)</small>

Department Head/Chair Name: _____
Department Head/Chair Signature: _____