LDRC REPRESENTATIVES

PRINTED NAME	*INITIALS*
USPS:	USPS:
APWU:	APWU:
NPMHU:	NPMHU:

UPDATED REGIONAL INSTRUCTION - 399 REVIEW

REVISED 9-1-2017 INSTALLATION INVENTORY
OF
MAIL PROCESSING OPERATIONS

FACILITY: **CITY:** **STATE/ZIP CODE:** **DATE:**

1. OPERATION NUMBER OR LOCAL DESCRIPTION	#	2. FUNCTION NUMBER OR LOCAL DESCRIPTION	3. CRAFT ASSIGNED AS OF 9-1-2017 (PLACE A "X" IN COLUMN)		4. NUMBER OF ATTACHED DIAGRAM(S) (OPTIONAL)
			CLERK	MAIL HANDLER	
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