



**WeBuyPostage.com**

**WeBuyPostage.com**  
2428 East Harrisburg Pike  
Middletown, Pa 17057

# Postage Reimbursement Request Form

**Instructions:** Please complete this form and include it with your shipment. You may attach a separate list if necessary

### Contact Information

**Date:** \_\_\_\_\_  
**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
\_\_\_\_\_  
**City:** \_\_\_\_\_  
**State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

### Method of Reimbursement

\_\_\_\_\_ Bank Check  
\_\_\_\_\_ PayPal

### Postage Details

Item	Description	Quantity	For Internal Use

**This Form is REQUIRED on any reimbursement request totaling over \$500. Failure to include this form may result in a delay in processing for payment**

### The Source of Stamps You Are Selling To Us

\_\_\_\_\_ Personal or Family Collection  
\_\_\_\_\_ Closed Business  
\_\_\_\_\_ Excess/Not Needed Postage  
\_\_\_\_\_ Other Please Explain: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_