CARRIER INTERVIEW LOG

Month: _____ **FY:** _____

UNIT: **ZIP CODE:**

Total NUMBER OF ROUTES IN THIS ZIP CODE:

Route Number	Date Edit Sheet Reviewed by Carrier	Changes Needed Yes or No	Carrier Signature	Date Edit Sheet Mailed to AMS

(A sparate form is required for each zone)

I certify that the redbook coordinator has been given time to complete and submit EDIT BOOKS.

Postmaster/Station Mgr reviewed on Date: _____, Signature: _____

Send original to: AMS, PO Box 882706, San Francisco CA 94188-2706
(Keep one copy at unit)

All Edit Books must to submitted, Routes and PO Box sections, with or without changes !!

THANK YOU