

Licensed Post Office
[ADDRESS]
[SUBURB] [STATE] [P/C]

DATE

Area Manager
[ADDRESS]
[SUBURB] [STATE] [P/C]

Dear [Manager's Name].

REQUEST FOR LiPOMS DATA COLLECTION REPORT

Please supply me with the current LiPOMS Data Collection Report for this LPO (refer section 12.6.1 of the LPO Operational & Accounting Procedures).

Your early attention to this is requested. Thank you.

Yours faithfully,

[LICENSEE]