

# UPS PROCESSING FORM

FOR UNIVERSITY BUSINESS RELATED SHIPMENTS - ONLY

Mail Room Only: Processed by/Date \_\_\_\_\_

<b>SENDER INFORMATION</b>	<b>RECIPIENT INFORMATION</b>
DEPARTMENT NAME: _____	TO: _____
FOAPAL (FUND/ORG/PGM): _____ - _____ - _____	DAYTIME PH #: (    )    -    ext.
NUMBER OF ARTICLES: _____	COMPANY: _____
LETTER: <input type="checkbox"/> 2lbs: <input type="checkbox"/> BOX: <input type="checkbox"/>	ADDRESS: _____
WEIGHT: _____	DEPT/SUITE#: _____
	CITY _____ ST _____ ZIP _____ - _____
	IS ADDRESS A PRIVATE RESIDENCE?      YES <input type="checkbox"/> NO <input type="checkbox"/>

PLEASE NOTE THAT IF A SIGNATURE IS REQUIRED, UPS WILL MAKE THREE (3) ATTEMPTS AT DELIVERY BEFORE RETURNING THE ARTICLE TO THE SENDER. THE TIME AND DAYS OF THE REDELIVERY ATTEMPTS ARE AT THE DISCRETION OF UPS.

PLEASE CONFIRM THAT THE DAYTIME TELEPHONE NUMBER OF THE RECIPIENT IS CURRENT AND VALID.

PLEASE CONFIRM THAT THE RECIPIENT ADDRESS IS A PRIVATE RESIDENCE BY CHECKING "YES" OR "NO".

UPS WILL ATTEMPT DELIVERY TO PO BOXES BUT TIME IN TRANSIT IS NOT GUARANTEED.

PLEASE VERIFY THE ACCURACY OF THIS FORM BY SIGNING AND DATING WHERE INDICATED.

ALL CHARGES WILL BE DEBITED AGAINST ACCOUNT 71575.

**CHECK ONE:**

- UPS Next Day Air      BY 10:30 am NEXT BUSINESS DAY (Except Hawaii)
- UPS 2<sup>nd</sup> Day Air      BY END OF 2ND BUSINESS DAY (Except Hawaii)
- UPS Ground      BY END OF DAY, 2 TO 5 BUSINESS DAYS IN TRANSIT
- SATURDAY      ADDITIONAL \$10.00 SURCHARGE

**CHECK ALL THAT APPLY:**

- SIGNATURE REQUIRED
- DECLARED VALUE OVER 100.00      DOLLAR AMOUNT: \_\_\_\_\_

SPECIAL INSTRUCTIONS: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**THIS COMPLETED FORM MUST ACCOMPANY YOUR UPS ARTICLES BY 3:15 PM TO ENSURE SAME DAY PICKUP BY UPS.**