## **CUSTOMER INFORMATION:**

Today's Date		l <u></u>	Date to be Delivered By	
		☐ Not Critical*		□рм
Your Name		Department		
Box No.	Phone No.	E-Mail		
Postage Account Num	ber			
SHIPPING INFORM	1ATION:			_
Name of Person/Comp				
Street Address				
City/State/Country/Zi	o Code			
Person/Company Email		Person/Company Pl	Person/Company Phone	
Do you want the	recipient to sign for the pad	ckage/envelope?	□Yes	$\square_{No}$
Do you need to in	nsure the package for more	e than \$100?	☐Yes \$	🗆 No
Do you need to h	ave this package/envelope	e delivered on a Saturday?	□Yes	$\square_{No}$
SERVICE TYPE:				
FedEx				
□ups				
NOTES:	*The most economica	al service will be used if no delive	ery date is given	
NOTES:				