UPS DOMESTIC FORM (ALL PACKAGES MUST BE TO MAIL ROOM BY 1:00PM)

SENDER INFORM	IATION:		
SENDER NAME:	DEI	DEPARTMENT: EMAIL:	
PHONE NUMBE	R:EM		
BUDGET NUMBER:NUM		NUMBER OF PACKAGES:	
RECIPIENT INFO	RMATION (All fields required):		
COMPANY NAM	E:C(ONTACT NAME:	
PHONE NUMBER	:TYPE OF	ADDRESS: Residential Commercial	
ADDRESS (NO PC) BOXES):		
<u>SERVICE:</u> (Please Circle)		delivery by 9:30 a.m. the next business day ery by 12 p.m. the next business day	
	UPS Next Day AirSaver - guaranteed UPS 2Day – guaranteed delivery by 4 UPS 3Day – guaranteed delivery by 4 UPS Ground Services - guaranteed delivery by 4	:30 p.m. the third business day	
SPECIAL NOTES:			
OFFICE USE ONL	v .		
		:	
	EXAGE TYPE(S):COST OF PACKAGE(S):		
	BER(S):		
		EMAILED	

Least expensive for overnight