|  |
| --- |
| **UPS SHIPPING INFORMATION FORM** |

**Billing Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Fund # | Dept. ID # | Account # | Program # | Project/Grant # | Class # |
|   |   |   |   |   |   |   |   |   |   |   | 6 | 6 | 0 | 0 | 0 | 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

[x]  Bill Sender (State account #) - see above boxes

[ ]  Bill Recipient (UPS account #)

[ ]  Bill 3rd Party (UPS account #)

**Shipping Information**

|  |  |
| --- | --- |
| **TO:** |  |
| Company or Name:  |       |
| Attention: |       |
| Address 1: |       |
| Address 2: |       |
| Address 3: |       |
| City/State/Zip: |       |
| Phone: |       |
| FROM: |  |
| Name: |       |
| Department: |       |
| Phone: |       |

\*UPS will only accept shipments to a valid street address. **P.O. box shipments must be shipped via USPS.**

|  |  |
| --- | --- |
| **Please email tracking # to:** |       @calpoly.edu |

**Package Information**

***Type of Service:*** (Check Only One)

[ ]  Groundtrac

[ ]  3 Day Select

[ ]  2nd Day Air AM

[ ]  2nd Day Air

[ ]  Next Day Air Early AM ($$$$)

[ ]  Next Day Air

[ ]  Next Day Air Saver

[ ]  International Express

***Mark One:*** [ ]  Residential [ ]  Commercial

***Contents:***
(Detailed content description required when shipping internationally)

***Value:***

***Insurance:*** [ ]  Yes [ ]  No

Package is automatically insured up to a value of $100. Insurance for anything over $100 must be requested.

***Special Handling:***

[ ]  Saturday delivery ($10 additional fee)

(For Warehouse Use Only)

|  |  |
| --- | --- |
| Amount Charged: | Date Shipped: |

**Parcels received at Distribution Services after 2 PM may be shipped the following business day.**

*This form will be returned via campus mail to the ‘from’ department*

*Questions?: Call Distribution Services @ x62872*