

Bloomsburg University Mail Services

Shipping Request Form

NAME: _____

DATE: _____

DEPARTMENT: _____

COST CENTER: _____

EMAIL ADDRESS: _____

PLACE A CHECK NEXT TO THE PREFERRED SERVICE

- NEXT DAY
- 2ND DAY
- 3RD DAY
- GROUND DELIVERY
- OTHER

PLACE A CHECK NEXT TO THE PREFERRED CARRIER

- UPS
- FEDEX
- RATE SHOP FOR MOST ECONOMICAL

SHIPPING TO

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

DECLARED VALUE: _____

INSTRUCTIONS

ATTACH THIS FORM TO THE PACKAGE

**PLACE PACKAGE IN YOUR BUILDING'S MAIL ROOM WITH THE OUTGOING MAIL
IF SENDING MULTIPLE OR OVERSIZED PACKAGES PLEASE CONTACT MAIL
SERVICES PRIOR TO PLACING ITEMS IN MAIL ROOM (X4403)**