

University of North Dakota Campus Postal Services Departmental Shipping Form

Dept Name: _____ PS Chartfield #: _____

Box Number: _____ Recipients UPS or Fed Ex #: _____
(Use only When Shipping Charges to Be Paid By Recipient)

Name: _____ Date: _____

Service: (Circle One) UPS Federal Express

Contact Person:	
Company:	
Street Address:	
Additional Address Info:	
City, State, Zip (Country If Not US)	
Phone: (Required for Foreign Countries)	

Type of Service: (Circle One)	Additional Services: (Additional Fees Apply)
Next Day Morning	<input type="checkbox"/> Insurance: \$ _____ (Coverage may be denied by UPS or Fed Ex if not adequately packaged)
Next Day Afternoon UPS 3 rd Day	
2 nd Day Delivery UPS Ground	
	<input type="checkbox"/> Saturday Delivery

Foreign Addresses Only	Value: \$ _____
Description: _____	

Contact CPS at 7-2279 to sign-up for UPS and Fed Ex shipping on-line

Canary Copy will be returned to the department by Intra-campus Mail with Tracking Number.

University of North Dakota Campus Postal Services Departmental Shipping Form

Dept Name: _____ PS Chartfield #: _____

Box Number: _____ Recipients UPS or Fed Ex #: _____
(Use only When Shipping Charges to Be Paid By Recipient)

Name: _____ Date: _____

Service: (Circle One) UPS Federal Express

Contact Person:	
Company:	
Street Address:	
Additional Address Info:	
City, State, Zip (Country If Not US)	
Phone: (Required for Foreign Countries)	

Type of Service: (Circle One)	Additional Services: (Additional Fees Apply)
Next Day Morning	<input type="checkbox"/> Insurance: \$ _____ (Coverage may be denied by UPS or Fed Ex if not adequately packaged)
Next Day Afternoon UPS 3 rd Day	
2 nd Day Delivery UPS Ground	
	<input type="checkbox"/> Saturday Delivery

Foreign Addresses Only	Value: \$ _____
Description: _____	

Contact CPS at 7-2279 to sign-up for UPS and Fed Ex shipping on-line

Canary Copy will be returned to the department by Intra-campus Mail with Tracking Number.