UPS SHIPPING TICKET *Date:	UPS SHIPPING TICKET *Date:
*Highlighted Items must be filled in by shipper	*Highlighted Items must be filled in by shipper
SHIP TO:	SHIP TO:
*Name	*Name
*Address	*Address
*City, State, Zip	*City, State, Zip
*Phone Number	*Phone Number
optional	optional
Email Address	Email Address
For UPS use only	For UPS use only
Weight:	Weight:
*L: *W: *H:	*L: *W: *H:
Declared Value \$ (>100)	Declared Value \$ (>100)
Shipping Cost \$	Shipping Cost \$
EST Delivery:	EST Delivery:
Tracking Number – Copy from UPS Label:	Tracking Number – Copy from UPS Label:
1Z 363 012	<u>1Z 363 012</u>
	ance Keep bottom half for accounting-Send to Lori Sparks/Finance
SHIP FROM: *Date:	SHIP FROM: *Date:
*Resident Name	*Resident Name
*SP Address	*SP Address
*Phone Number	*Phone Number
Total amount to be billed to resident account	Total amount to be billed to resident account
\$	\$
Resident Signature:	Resident Signature:
(Only need if charging your Shell Point account)	(Only need if charging your Shell Point account)