

**WC CENTRAL SERVICE  
PACKAGE SHIPPING REQUEST FORM  
\*\*\*\*PLEASE PRINT ALL INFORMATION CLEARLY\*\*\*\***

DATE: \_\_\_\_\_

SENDER NAME: \_\_\_\_\_

SENDER DEPARTMENTCODE & DEPT NAME TO CHARGE SHIP COST TO:

(IF a student - just write STUDENT on this line. If Staff Personal write that)

HOW DO YOU WANT TO SEND THE PACKAGE, please check preference?:

STANDARD \_\_\_\_\_ 2ND DAY \_\_\_\_\_

NEXT DAY \_\_\_\_\_ OTHER \_\_\_\_\_

SPECIAL INSTRUCTIONS:  
\_\_\_\_\_

SEND PACKAGE TO (NAME): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE/COUNTRY AND ZIP CODE: \_\_\_\_\_

If International please be sure to include Country and Country Zip Code - We can NOT ship without

**\*\*\*\*\*CONTENTS OF PACKAGE (MUST BE FILLED IN) next line\*\*\*\*\***

\*\*\*INTERNATIONAL PKGS - MUST have full description of ALL contents

VALUE OF CONTENTS: \$ \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE, FOR INTERNAL USE ONLY**

UPS _____		TRACKING #: _____
FEDEX GROUND _____		
FEDEX EXPRESS _____		
USPS _____		Shipping Charge: \$ _____
		PAID BY: _____

Measurements:  
W \_\_\_\_\_ X L \_\_\_\_\_ X H \_\_\_\_\_ = \_\_\_\_\_ ÷ \_\_\_\_\_ = \_\_\_\_\_  
Dimensional Weight