

**\*\* NOTE: 2 COPIES MUST BE ATTACHED TO EACH PACKAGE \*\***

**USUHS COURIER DELIVERY FORM**

**USUHS INFORMATION:**

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

DEPARTMENT: \_\_\_\_\_ DEPARTMENT PHONE NUMBER: \_\_\_\_\_

**DELIVER TO:** (NAME, ADDRESS, PHONE NUMBER)

**PICKUP:** (NAME, ADDRESS, PHONE NUMBER)

SIGNATURE OF RECEIVER: \_\_\_\_\_ DATE: \_\_\_\_\_

NUMBER/TYPE OF PACKAGES/BOXES: \_\_\_\_\_