## **INTERNATIONAL SHIPPING FORM**

Date:	Your 7	Your 700 # :	
Sender Information:			
Name:			
Address:			
Address:			
		Zip:	
Phone #: ()	Email:		
Signature:			
Recipient Information	n:		
Name:			
Company:			
Address:			
City:	Province:	Code:	
Country:	Phone #:		
The	following portion is to be filled out b	by the Shipping Agent	
Service:	Note	s:	
Declared Value:			
Additional Handling:			

## UNION PACK & SHIP

## **UPS Terms and Conditions:**

University of Central Missouri/Union Pack & Ship does not assume liability for lost or damaged parcels. In the event a parcel is lost or damaged, you must submit a claim to "Union Pack & Ship" located in the UCM Elliott Union with your shipping order, as well as proof of the actual value of the contents within 30 days of the shipment date. The filing of claims does not in any way make UCM/Union Pack & Ship responsible for the contents or its value. Union Pack & Ship reserves the right to inspect all packages before shipment.

USPS packages only:

I have read and understand the conditions for filing a claim through the United States Postal Service. \_\_\_\_\_ initial here for USPS packages