

**UPS Shipments (Outgoing)**  
**Mineral Point Unified School District**  
705 Ross Street  
Mineral Point, WI 53565  
(608)987-2371

**UPS Shipper # WI 5-79-045**

Date: \_\_\_\_\_

Staff Member: \_\_\_\_\_

Address to where being sent:

Rtn Auth. #: \_\_\_\_\_

\_\_\_\_\_

Call Tag Issued? yes \_\_\_\_\_ no \_\_\_\_\_

\_\_\_\_\_

Our P.O. #: \_\_\_\_\_

\_\_\_\_\_

Preview? yes \_\_\_\_\_ no \_\_\_\_\_

\_\_\_\_\_

Invoice #\*: \_\_\_\_\_

Company's Phone #: \_\_\_\_\_

Order #: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Date Order Received: \_\_\_\_\_

Items To Be Sent (include qty./reason for return if applicable):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**For Returns:** Most companies require a return authorization and will not accept packages without prior approval. Instructions for returns are usually included on the packing slip. If not, please call and find out what is needed for your return.

**Attach a copy of the packing slip to this form and send the UNSEALED package to the HS/MS office.**

**OFFICE USE ONLY**

Date Sent: \_\_\_\_\_

Weight: \_\_\_\_\_

Pick Up Record #: \_\_\_\_\_

Zone: \_\_\_\_\_

# Boxes: \_\_\_\_\_

Commercial.

Residential