

OAKLAND UNIVERSITY MAIL SERVICES REQUEST

IF FORM IS NOT FILLED OUT PROPERLY, THE MAIL WILL BE RETURNED THE NEXT BUSINESS DAY.

UNS-MSR 10/10

THIS SLIP MUST BE SIGNED AND ATTACHED TO ALL MAIL OR PACKAGE THAT YOU WISH TO HAVE PROCESSED

Date _____ Name _____

Department Name _____ Fund Number _____

Place Barcode Sticker Here

•United States Postal Services (USPS)

First Class
 Media Rate
 Express Mail
 Priority Mail
 Parcel Post
 Certified Mail
 Registered Mail
 Return Receipt
 Delivery Confirmation
Insured Value \$ _____

•United Parcel Service (UPS)

Next Day
 Next Day Saver
 2nd Day
 3rd Day
 Ground
 Saturday Delivery
Insured Value \$ _____

•Federal Express (FedEx)

Priority Overnight
 Standard Overnight
 2nd Day
 Express Saver
 Saturday Delivery
Insured Value \$ _____

•International Mail

Air Mail
 Surface
 Express
 Priority

•DHL (International Only)
Phone Number Required
 Express Worldwide

Total Piece Count: Parcel _____ Flats _____ Letters _____