Texas Tech University - MailTech
International On-Line Shipping Form

**Instructions:**

1. Fill in the appropriate sender and receiver information. Commercial Carriers will not deliver to Post Office Box addresses, so when shipping use a physical (street) address for the receiver’s address. We must obtain a valid TechFim number for all shipments, please provide so as not to delay your shipment.
2. Place this form in the envelope sleeve or attach to the outside of your shipment.
3. MailTech personnel will use this information to process an air way bill for your shipment, so please make sure the address appears legibly and accurately.
4. Bill receiver and bill 3rd party shipments require a valid Commercial Carrier account number.

<table>
<thead>
<tr>
<th>Carrier Desired (Circle One):</th>
<th>FedEx</th>
<th>UPS</th>
</tr>
</thead>
</table>

**Date:** ____________________________

**Bill to:** Sender:___ Receiver___ 3rd Party___

**Sender Information**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Department:</th>
<th>Mail Stop:</th>
<th>Phone Number:</th>
<th>Fax Number:</th>
<th>FOP Account Number</th>
</tr>
</thead>
</table>

**Receiver Information**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Company:</th>
<th>Address 1: (Physical Address Required)</th>
<th>Address 2:</th>
<th>City:</th>
<th>Province/State:</th>
<th>Country:</th>
<th>Postal Code:</th>
<th>Phone:</th>
</tr>
</thead>
</table>

**Receiver or 3rd Party Acct:**

**Residential:**___ Business:___ (mandatory)

**Shipment Information:**

The only service available with MailTech discounts from FedEx is International Priority.

Does this shipment contain hazardous materials? Yes ___ No ____ If yes, please attach MSDS and any special handling instructions. **A number to contact 24 hours a day is required.**

24 Contact Name/Phone Number: ____________________________

**Declared Value Amount:** $______________________________

**EXACT Contents/Customs Information (MANDATORY):** ____________________________

**Commercial Invoice Required on all International Mail.**

**Bill Duty/Tax/Fees to:** Sender:___ Receiver:___ 3rd party:___

Please choose one: Fax tracking number to me___

Send tracking # via campus mail ___

Email tracking # to me ___

Email address: ____________________________