

Pickup Service Statement

Express Mail, Global Express Guaranteed, Priority Mail, or Parcel Post

1. Customer Information

Customer Name _____

Company Name _____

Address 1 _____

Address 2 _____

City _____

State _____

ZIP + 4 _____

2. Product Information

Quantity

Express Mail _____

Global Express Guaranteed _____

Priority Mail _____

Parcel Post _____

(Domestic or International)

Estimated total weight

of all packages _____

(In pounds)

3. Payment Method

Check made payable to "Postmaster"

Merchandise Return Label

Express Mail Corporate Account No. or Federal Agency No.:

Postage Due Account

Stamps or Metered

Postage *(Affix at right)*

5. Customer Signature _____

6. USPS Signature _____

7. Date & Time of Pickup _____

Instructions

Completed by Postal Employee:

1. **Customer Information:** Enter customer name (if applicable), address, suite number, city, state, and ZIP + 4 where pickup is requested. If the ZIP + 4 is not known, enter the ZIP Code.
2. **Product Information:** Enter the quantity of each product to be picked up and enter the estimated weight in pounds for all products.
3. **Payment Method:** Indicate method of payment for pickup service. Be sure to include account number where applicable.

Completed by the Customer:

4. **Affix Stamps or Meter Strip Here:** If applicable.
5. Customer Signature.

Completed by Postal Employee:

6. This space is for the signature of the postal employee who picks up the mailpiece(s).
7. The postal employee enters the date and time and place of the pickup.

NOTE TO POSTAL EMPLOYEE: Provide customer part 2, *Customer copy*; and return part 1, *Finance copy* to office for processing.