

Small Package Receiving Order Form



STEC Security Office • (385) 468 – 2266

Event: _____ Event Date: _____

Shipping Label Information:

Company and/or Contact Name: _____

Phone: _____ Fax: _____

Address: _____

City: _____ State: _____ Zip: _____

Number of Packages: _____ For Pickup: For Delivery:

Arrival Date: _____ Pickup or Delivery Date & Time: _____

Name(s) authorized to pick up or sign for packages: _____ Delivery Location: _____

Storage Location: _____ Tracking #(s): _____

Payment Information: **Payment must be received before service is provided.** Payment can be made by Cash, Check, Visa, Master Card or American Express.

Receiving:	\$10.00	X	_____ # of boxes	=	\$ _____
Overnight Storage:	\$5.00	X	_____ # of boxes X _____ # of nights	=	\$ _____
Pallet Charge:	\$1.00/pound	X	_____ pounds	=	\$ _____
Pallet Charge (No Decorator):	\$75.00/pallet	X	_____ # of pallets	=	\$ _____
				Total:	= \$ _____

Payment Type: Cash: Check: Credit Card: Settlement: Receipt # _____

Card Number: _____ Expiration Date: _____

Name: _____ Signature: _____

Date Received: _____ Number of Packages: _____

Receiving Officer _____ Releasing Officer _____

Shipment Released to (*print name*): _____ Shipment Released to (*signature*): _____

Date: _____