

SHIPPING



Date: _____

130 Gardeners Circle • Johns Island, SC 29455
Phone (843) 768-2626 • Fax (843) 768-1473

Shipper Information:

Name: _____

Phone #: _____

E-Mail Address: _____

Shipping To:

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Insurance Amount: \$ _____ (If left blank, parcel insured for \$100 w/Fedex & UPS.)*

Fed Ex / UPS Acct # _____ (Service Charge \$5)

Zip Code on Account _____

Please Print Clearly

To be Completed by Post & Computer Center

FedEx (CANNOT SHIP TO P.O. BOXES) *

- First Overnight (next day, early a.m.)
- Priority Overnight (next day, mid a.m.)
- Standard Overnight (next day, end of day)
- 2nd Day AM 2nd Day PM
- Express Saver
- Saturday**
- Ground / Home

UPS (CANNOT SHIP TO P.O. BOXES) *

- Early a.m.
- Next Day Air
- Next Day Saver
- 2nd Day a.m.
- 2nd Day Standard
- 3rd Day Select
- Ground

USPS PRIORITY EXPRESS MAIL 1-2 day shipping

- USPS PRIORITY MAIL** 2-3 day shipping
- USPS Ground Advantage** up to 5 days shipping

USPS 1st Class Flats up to 5 days shipping

- USPS Media Mail** up to 10 days shipping
- International USPS**

Packaged by customer

Packaged by PCC

Weight: _____

Dimensions: _____ x _____ x _____

*Post & Computer Center is not liable for damaged or lost packages during the shipment process.

Total Cost: _____

*Packaging: _____

By filling this form out customer agrees to acknowledgment of service(s) and shipping rate(s).

** As of **March 1st 2020** UPS, FEDEX & USPS no longer guarantee shipment dates or times.

International Shipments

Customs Information

Country:

Shipping Address:

Package Contents:

Customs Value:

VAT #

- Lic. # _____

- Cert. # _____

- Invoice # _____