



PLEASE PRINT LEGIBLY

RETURN ADDRESS (PLEASE PRINT)		DATE
NAME DAN GILES		9/28/01
STREET 1709 LUCILE AVE		
CITY	STATE	ZIP
		90026
TELEPHONE (323)6600965		

UPS CUSTOMER COUNTER
SHIPPING RECORD

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1-800-PICK-UPS
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SHIPPER COMPLETE ALL INFORMATION SHOWN BELOW / A DUPLICATE ADDRESS LABEL SHOULD BE ENCLOSED IN EACH PACKAGE

**** FOR UPS USE ONLY ****

PACKAGE	SEND TO ADDRESS / LIST EACH PACKAGE SEPARATELY	SHIPPER NO. - PACKAGE ID # - CHARGES
1	NAME ELIZABETH GOLDSTEIN STREET 501 STANYON ST CITY SAN FRANCISCO CA STATE CA ZIP 94117 PACKAGE CONTENTS: SCULPTING Next Day Air Tracking Number 1Z 910 X05 01 1037 585 3 IRE	C.O.D. AMOUNT \$ CHECK HERE IF "CASHIER'S OK/ MONEY ORDER ONLY" See Instructions on C.O.D. Tag. <input type="checkbox"/> INSURED* VALUE \$ 1000.00
	NAME STREET CITY STATE ZIP PACKAGE CONTENTS: PLACE TRACKING NUMBER RECEIPT HERE	C.O.D. AMOUNT \$ CHECK HERE IF "CASHIER'S OK/ MONEY ORDER ONLY" See Instructions on C.O.D. Tag. <input type="checkbox"/> INSURED* VALUE \$
	NAME STREET CITY STATE ZIP PACKAGE CONTENTS: PLACE TRACKING NUMBER RECEIPT HERE	C.O.D. AMOUNT \$ CHECK HERE IF "CASHIER'S OK/ MONEY ORDER ONLY" See Instructions on C.O.D. Tag. <input type="checkbox"/> INSURED* VALUE \$
	** TOTAL ** CR 39.85 910X05 09/27/01 TRANS #4814 REG #4	

SPT 28
Person's Hintell
F5B AM
ATU
MAY 100M

DV CHG 3.15
FUE CHG 0.45
P#948 Z104 6.94 LB 36.25

Thank You For Using
United Parcel Service

The value is recorded in writing on this receipt, the shipper agrees that the released value of each package covered by this receipt is \$100, which is a reasonable value under the circumstances of transportation, even in the event that the carrier resackages or assists the shipper in packaging a shipment. In addition, the maximum value per package is \$50,000. The maximum liability per pound by UPS shall not exceed \$100, regardless of the purchase of insurance for protection in excess of \$100. The maximum liability per package assumed by the applicable insurance company shall not exceed \$50,000 (less the released value), regardless of the value in excess of the maximum. Claims not made to the carrier within 9 months of the scheduled delivery date are waived. The carrier shall not be liable for special, incidental, or consequential damages.

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REV 05/01 W

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