

Parcel Management Services Guest Charge Slip

Guest Fu	II Name:			Guest Room #:	Ce	ll#:					
Company	/Event Name:			Master Acct.#:							
Requeste	ed By: 🔲 In Person 🛚	■By Phone (name):	Print Name: Date: ating how many packages you are shipping out. You can attach these forms to your e pickups and shipments. Please provide an email address for us to send the tracking								
The signee below authorizes all charges to be applied to the Guest's Room Folio or Master Billing Account for the services received at the FedEx Office											
Business Center.											
Signature:				t Name:	Date:						
Notes: Please fill out the forms indicating how many packages you are shipping out. You can attach these forms to your boxes and we will process the pickups and shipments. Please provide an email address for us to send the tracking numbers by email. If you have any question, please call 305.960.2030 option 9.											
HPOS/OTP Posting Date: Amount:				TP Receipt #:	FXO TM:						
Qty	Package(s) Weight	SKU - Inbound Pickup By Guest	SKU - Outbound Drop Off By Guest	Charge	Subtotal	Concession	Line Total				
	0.0 – 1.0 lb.	50127	N/A	\$2.00							
	1.1 – 10.0 lbs.	1359	1358	\$10.00							
	10.1 – 20.0 lbs.	1360	1355	\$15.00							
	20.1 – 30.0 lbs.	1361	1356	\$20.00							
	Over 30.0 lbs.	1315	1357	\$25.00							
	*Pallets & Crates	40268	40268	\$0.50 p/ lb (\$150 Min)							
Qty	Package(s) Weight	SKU - Inbound Delivered by FXO	SKU - Outbound Pickup by FXO	Charge	Subtotal	Concession	Line Total				
	Envelopes	40223	40222	\$5.00							
	0.0 – 1.0 lb.	0263	40003	\$5.00							
	1.1 – 10.0 lbs.	0245	50139	\$15.00							
	10.1 – 20.0 lbs.	1381	50149	\$20.00							
	20.1 – 30.0 lbs.	1382	50150	\$30.00							
	30.1 – 40.0 lbs.	1389	50151	\$40.00							
	40.1 – 60.0 lbs.	1390	50152	\$50.00							
	Over 60.0 lbs.	1392	50154	\$70.00							
	*Pallets & Crates	40268	40268	\$0.50 p/ lb (\$150 Min)							
	0 – 10.0 lbs.	Storage Fee Day 6	1365	\$5.00							
	11.0 – 30.0 lbs.	Storage Fee Day 6	1366	\$10.00							
	31.0 – 60.0 lbs.	Storage Fee Day 6	0264	\$15.00							
	Over 60.0 lbs.	Storage Fee Day 6	40220	\$25.00							
	Pallets & Crates	Storage Fee Day 6	40221	\$50.00							
	Oversize Items	Storage Fee Day 6	1367	\$25.00							
	Labor Fee	Per Hour/15 mins	11020	\$70.00							

Totals

^{*}For inbound/outbound pallets or crates, the fee is \$0.50 per pound (\$150.00 minimum). Charges are consolidated into a single fee for receiving/delivery or pickup, which is applied to each pallet/crate handled. A Labor Fee of \$70.00 per hour will apply for breaking down pallets, building pallets, or excessive package handling/moving due to a customer's request. The Labor Fee will be charged in 15 minute increments.



HCO Parcel Management Credit Card Authorization Form

Instructions

It is essential that we protect the security of our customer's credit card data and personal information. This includes the processing, handling and storing of a customer's credit card, credit card data and/or receipt. The use of the Credit Card Authorization Form (CCAF) is restricted to Parcel Management locations only and the transaction must be completed (tendered in OTP/FPOS) immediately after the pickup or delivery has occurred and the credit card information must be disposed of in the Iron Mountain shredding bin. Under no circumstances should credit card data be temporarily or permanently retained within the Business Center and FedEx Office cannot accept credit card data via email or fax transmittal.

Customer/Account Information

oustomor/Account information									
Customer Name / Event Name:									
Email:		Cell:							
Package IDs or Tracking Numbers:									
Transaction Amount:	ransaction Amount: Date:		OTP Receipt N	lumber:					
DELIVERY OPTIONS: NO SHIPMENT. EXHIBIT ITEMS WILL BE HAND CARRIED INTO EXHIBITION									
■ WILL PICK UP ITEMS AT THE FEDEX OFFICE ■ DELIVER ITEMS TO OUR EXHIBIT (TABLE NUMBER) BY									
	DA ⁻	ΓE:							
DETACH AND SUDED IMMEDIATELY ACTED THE TRANSACTION IS TENDEDED									
DETACH AND SHRED IMMEDIATELY AFTER THE TRANSACTION IS TENDERED									
Name of the Credit Card Account Holder:	Credit Card Type:		OVisa						
		OFedEx Office Account # ON		t # OMasterCard					
	○ FedEx Account #		ODiscover						
		O AME	X	ODinners Club					
Credit Card Number :				Expiration Date:					
Account Holder Signature:				Billing Zip Code:					
Account Holder Signature.				billing Zip Code.					