



OUTGOING SHIPPING AUTHORIZATION FORM

All packages that are shipped out of the hotel directly **MUST** be accompanied with the following **COMPLETE** information. Boxes will not be shipped without this information. Hotel is not responsible for any box that is left at hotel without shipping information attached to it. **ONE FORM REQUIRED PER ADDRESS**

DATE:	NUMBER OF ITEMS TO BE SHIPPED:	BELLMEN:
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COURIER:

FedEx Express	<input type="checkbox"/> Priority Overnight	<input type="checkbox"/> Standard Overnight	<input type="checkbox"/> Economy 2 Day	<input type="checkbox"/> Express Saver 3 Day	<input type="checkbox"/> Saturday Delivery	<input type="checkbox"/> International
FedEx Ground	<input type="checkbox"/>					
UPS	<input type="checkbox"/> COD	<input type="checkbox"/> Standard Ground	<input type="checkbox"/> 1 st Day Air/2 nd Day Air	<input type="checkbox"/> Saturday Delivery	<input type="checkbox"/> 3 Day Economy	<input type="checkbox"/> International
Other	<input type="checkbox"/> _____					

COURIER PAYMENT:

<input type="checkbox"/> Credit Card	NAME ON CARD: _____
	MC/VISA/AMEX #: _____ EXP: _____
<input type="checkbox"/> Account Number	_____
<input type="checkbox"/> Pre-Paid Label	

BEING SENT FROM:

BEING SENT TO:

(NAME) _____
Hilton Vancouver Washington
301 W 6th Street
Vancouver, WA 98660
(PHONE #) _____

(NAME) _____
(ADDRESS) _____

(PHONE #) _____

HOTEL PAYMENT:

\$2.50 (0-49lbs) x _____	\$5.00 (50+lbs) x _____	\$20.00 (Pallet) x _____
TOTAL = \$ _____		
CHARGE TO: <input type="checkbox"/> Room # _____ <input type="checkbox"/> House Account _____ <input type="checkbox"/> Credit Card <input type="checkbox"/> Cash		

GUEST SIGNATURE: _____ **DATE:** _____

TRACKING NUMBERS:

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Any questions please call the Bell Desk directly at 360-828-4329