

CONSUMER PERCEPTION SURVEY

Paper Surveys Shipment Form – For CPS County Coordinator Use Only

In order for us to create a FED EX label for your shipment, please complete fully and email this form to Marylou Gilbert (MarylouGilbert@mednet.ucla.edu).

CPS County coordinator or Sender:

Name: _____ Title: _____

Agency/Department: _____

Address: _____

Phone number: _____ Email: _____

Number of boxes/envelopes/padded paks you will ship, including the size (small, medium, or large) and **approximate weight** of each box/envelope:

- Small box; how many _____ approximate weight of each _____.
- Medium box; how many _____ approximate weight of each _____.
- Large box; how many _____ approximate weight of each _____.
- Small envelope; how many _____ approximate weight of each _____.
- Med envelope; how many _____ approximate weight of each _____.
- Large envelope; how many _____ approximate weight of each _____.
- Small pak; how many _____ approximate weight of each _____.
- Med pak; how many _____ approximate weight of each _____.
- Large pak; how many _____ approximate weight of each _____.
- We will use our own packaging; how many _____ approximate weight of each _____.

Additional shipping info: _____

FedEx Pick up or Drop off - Please indicate your preference:

We will be scheduling a FedEx pick up on this date: _____
**TO SCHEDULE A PICK UP PLEASE CALL/ARRANGE WITH FED EX DIRECTLY
AT: 800-463-3339**

We will drop off the box(es)/package(s) at a FedEx facility/drop off on this date:
