

## Wilsona School District Mailing/Shipping Procedures

### US Mail – General Postage

- a) Items must be received by 10:30 to go out that day. Large quantities may take 2-3 days to process.
- b) All items MUST be “Post Office” ready for processing through the postage meter. Mail should be placed in envelopes and sealed, not folded or stapled. Packages must be sealed and labeled.
- c) Send items to the Business Office – items received through District Mail will be processed upon receipt.
- d) Postage will be billed to the appropriate department/site based on the return address label.

### Certified Mail

- a) Items must be received by 10:30 to go out that day.
- b) All items MUST be “Post Office” ready for processing through the postage meter.
- c) Fill out the green USPS form 3800 (Form A) and the pale green USPS form 3811 (Form B) and paper clip them to the envelope.
- d) Send the envelope and the two USPO forms to the Business Office. The Business Office will affix the postage and the forms to the envelope being mailed.
- e) The Business Office will return a copy of the envelope and USPO forms to the department/site for your records.
- f) Postage will be billed to the appropriate department/site based on the return address label.

### FedEx

- a) Packages to be shipped through FedEx are to be picked up at the site/department
- b) Box items to be shipped. Seal the box appropriately for shipping.
- c) Prepare a Wilsona Shipping Request Form (Form C) and send the form to the Business Office.
- d) The Business Office will prepare the shipping label and send it back to the department/site to be affixed to the package. Additionally, the Business office will prepare 2 copies of the shipping label; one will be returned with the original shipping label for your records and one will be sent to Accounts Payable for billing.
- e) The department/site MUST contact FedEx to arrange for pick-up at 800-463-3339.

### UPS

- a) Wilsona School District does NOT utilize UPS for mailing and will not arrange for pick-up through UPS.
- b) The Business Office will **accept** items for UPS pick-up when a third party (such as State Testing) has arranged for and paid for pick-up through UPS.
- c) Prepare and seal package for mailing.
- d) Place the shipping label on the package.
- e) Send the package the Business Office and arrange for pick-up
- f) E-mail Maria Kielman at [mkielman@wilsona.k12.ca.us](mailto:mkielman@wilsona.k12.ca.us) that the package is coming to the Business Office for pick-up.
- g) The Business Office will mail the pick-up receipt back to the sender

## Wilsona School District Shipping Procedures

### Form A

For Reference, the following is a copy of US Postal Service Form 3800:

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS. FOLD AT DOTTED LINE.

**CERTIFIED MAIL**

7000 1530 0001 2834 6853  
7000 1530 0001 2834 6853

ES89 4E82 1000 DEST 0007  
ES89 4E82 1000 DEST 0007

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT  
(Domestic Mail Only; No Insurance Coverage Provided)**

**OFFICIAL USE**

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
<b>Total Postage &amp; Fees</b>	<b>\$</b>	

**Sent To**

Street, Apt. No.; or PO Box No.

City, State, ZIP+4

PS Form 3800, May 2000 See Reverse for Instructions

### Form B

For reference, the following is a copy of US Postal Service Form 3811

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> <p>1. Article Addressed to:</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>A. Received by (Please Print Clearly)</p> <p>C. Signature</p> <p><b>X</b></p> </td> <td style="width: 50%; vertical-align: top;"> <p>B. Date of Delivery</p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> </td> </tr> </table> <p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered    <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail    <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee)    <input type="checkbox"/> Yes</p>	<p>A. Received by (Please Print Clearly)</p> <p>C. Signature</p> <p><b>X</b></p>	<p>B. Date of Delivery</p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>A. Received by (Please Print Clearly)</p> <p>C. Signature</p> <p><b>X</b></p>	<p>B. Date of Delivery</p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>2. Article Number (Copy from service label)</p>			

PS Form 3811, July 1999      Domestic Return Receipt      12298-00-9-0892

# Wilsona School District Shipping Request Form

Form C

	<input type="checkbox"/> <b>URGENT</b> - Need by: _____
Ship to:	Date Requested:
Address:	Phone #:
City/ST/Zip:	Reference PO No. (if applicable):

Complete Funding #s:						
Fund	Resource	Function	Goal	Object	Location	
SHIPPING CARRIER: <input type="checkbox"/> U.S. MAIL <input type="checkbox"/> Fed Ex <input type="checkbox"/> Other: _____						
<input type="checkbox"/> Authorization for Return (no charge) - Authorization No: _____						

DESCRIPTION OF PACKAGE CONTENTS:

Insurance Needed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Approx. Total Value: \$
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Reason for Mailing or Returning:

**FED EX SHIPMENTS:** (Select one)     Next Day by 10:00 AM     Next Day by 3:00 PM

**U.S. MAIL** (packages):

Quantity	Dimensions of Carton(s)	Weight of Carton(s)
X	X	
X	X	
X	X	

_____ Requested by	_____ Site	_____ Date	_____ Supervisor's Approval
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**For Business Services Use**

<b>2 -3 days processing time</b>	
Tracking Number(s):	Date mailed:
Processed by (initials / Date):	Sent to Requestor: