

Adrien
Susan Aasen

157-~~80~~
Col Ave

4th fl my M 10023

212-456-4058

ABC News Bid Series on a + E

Is 157 Columbus Ave
Correct?

1 FROM (Company) <i>Harold Weisberg</i> Street Address <i>7627 Old Receiver Rd</i> City <i>Frederick, MD</i> State ZIP CODE (Required) <i>21702</i> Sent by (Name/Dept) Phone Number <i>31-473-8186</i>		Preprint Format No.	Origin	Airbill Number 3884188943
2 TO (Company) <i>SUSAN AASEN</i> Street Address <i>157 COLUMBUS AVE</i> City <i>ABC NEWS 4th fl</i> State ZIP CODE (Required) <i>New York City NY 10023</i> Attention: (Name/Dept) Phone Number (Important) <i>212-456-4058</i>		4 Method of Payment <small>Assumed sender unless otherwise noted</small> <input type="checkbox"/> Bill Sender <small>Airborne Customer account no.</small> <input checked="" type="checkbox"/> Bill Receiver <small>Airborne Customer account no.</small> <input type="checkbox"/> Bill 3rd Party <small>Airborne Customer account no.</small> <input type="checkbox"/> Paid in Advance <small>Check No. Amount \$</small> Billing Reference will appear on invoice		5 Service Type One box must be checked with an "X". Assumed Express Service unless otherwise noted. <input checked="" type="checkbox"/> Express (Letter - 150 lbs) <input type="checkbox"/> Next Afternoon Shipments over 5 lbs will be charged at the Express rate. Next Afternoon delivery to Bold Red destinations only. <input type="checkbox"/> Next Afternoon (Letter - 5 lbs) <input type="checkbox"/> Second Day (Letter - 150 lbs)
3 Description THANK YOU FOR SHIPPING WITH AIRBORNE EXPRESS		6 NO. OF PKGS	7 WEIGHT (LBS)	8 CHECK IF <input type="checkbox"/> LETTER EXPRESS <input type="checkbox"/> EXPRESS PACK
Sender's Signature <i>Susan Aasen</i> Date		Special Instructions <input type="checkbox"/> Saturday Delivery (Extra charge) (not available to all locations) <input type="checkbox"/> Hold at Airborne <input type="checkbox"/> Lab Pack		AIRBORNE EXPRESS PO BOX 882, SEATTLE, WA 98111-0662
Airborne Signature Route No. Date Time		Declared Value Full Insurance Shipment Valuation <input type="checkbox"/> or <input type="checkbox"/> \$ Received At <input type="checkbox"/> Drop Box # <input type="checkbox"/> Airborne Terminal		

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