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Recipient's Phone Number (Very Important)

**SENDER'S COPY**

<p>1 From (Your Name) Please Print <i>McGraw-Hill</i></p> <p>Company <i>McGraw-Hill</i></p> <p>Street Address <i>1221 Avenue of the Americas</i></p> <p>City <i>New York, NY</i></p> <p>State <i>NY</i></p> <p>ZIP Required <i>10020</i></p>	<p>2 To (Recipient's Name) Please Print <i>Mr. Harrison</i></p> <p>Company <i>McGraw-Hill</i></p> <p>Exact Street Address (No Street Name to P.O. Boxes or P.O. Zip Codes) <i>151 Madison Avenue</i></p> <p>City <i>New York, NY</i></p> <p>State <i>NY</i></p> <p>ZIP Required <i>10017</i></p>	<p>3 PAYMENT: 1 <input type="checkbox"/> Bill Sender 2 <input checked="" type="checkbox"/> Bill Recipient's Fedex Acct. No. 3 <input type="checkbox"/> Bill 3rd Party Fedex Acct. No. 4 <input type="checkbox"/> Bill Credit Card          5 <input type="checkbox"/> Cash 6 <input type="checkbox"/> Fedex Acct. No. Fedex Acct. No. Fedex Acct. No. Fedex Acct. No.          7 <input type="checkbox"/> Credit Card No. <i>4532 1234 5678 9010</i> Exp. Date <i>12/31/99</i></p>	<p>8 SERVICE CONDITIONS, DECLARED VALUE AND LIMIT OF LIABILITY</p> <p>Use of this label constitutes your agreement to the service conditions in our contract. For more information, please refer to the back of this label. A copy of the contract is available at <a href="http://www.fedex.com">www.fedex.com</a>.</p> <p>Overweight Service: See U.S. Government Service Guide for details.</p> <p>We are not responsible for any claim in excess of \$100 per package. Maximum liability for any claim is \$100 per package. Maximum liability for any claim is \$100 per package. Maximum liability for any claim is \$100 per package.</p> <p>Insurance: For any loss, damage, or destruction of contents, you must purchase insurance from a third party. Insurance is not provided by FedEx. For more information, please refer to the back of this label.</p> <p>Other 1: _____</p> <p>Other 2: _____</p> <p>Total Charges: _____</p>																														
<p>4 SERVICES (Check only one box)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Priority Overnight (Delivery by 10:30 AM next business day)</th> <th>Standard Overnight (Delivery by 3:00 PM next business day)</th> </tr> <tr> <td>11 <input type="checkbox"/> YOUR PACKAGING</td> <td>51 <input type="checkbox"/> YOUR PACKAGING</td> </tr> <tr> <td>16 <input checked="" type="checkbox"/> FEDER LETTER</td> <td>56 <input type="checkbox"/> FEDER LETTER *</td> </tr> <tr> <td>12 <input type="checkbox"/> FEDER PAK *</td> <td>52 <input type="checkbox"/> FEDER PAK *</td> </tr> <tr> <td>13 <input type="checkbox"/> FEDER BOX</td> <td>53 <input type="checkbox"/> FEDER BOX</td> </tr> <tr> <td>14 <input type="checkbox"/> FEDER TUBE</td> <td>54 <input type="checkbox"/> FEDER TUBE</td> </tr> <tr> <td>Economy Two-Day (Delivery by second business day)</td> <td>Government Overnight (Delivery by second business day)</td> </tr> <tr> <td>30 <input type="checkbox"/> ECONOMY</td> <td>48 <input type="checkbox"/> GOVT LETTER</td> </tr> <tr> <td></td> <td>41 <input type="checkbox"/> GOVT PACKAGE</td> </tr> </table> <p>5 DELIVERY AND SPECIAL HANDLING (Check services required)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>1 <input type="checkbox"/> HOLD FOR PICK-UP (8 a.m. to 6 p.m.)</td> <td>2 <input type="checkbox"/> DELIVER WEEKDAY (Not available to all accounts)</td> </tr> <tr> <td>3 <input type="checkbox"/> DANGEROUS GOODS (Class change)</td> <td>4 <input type="checkbox"/> DRY ICE (Class change)</td> </tr> <tr> <td>5 <input type="checkbox"/> OTHER SPECIAL SERVICE</td> <td>6 <input type="checkbox"/> SIGNATURE REQUIRED (Class change)</td> </tr> <tr> <td>7 <input type="checkbox"/> SIGNATURE REQUIRED (Class change)</td> <td>8 <input type="checkbox"/> SIGNATURE REQUIRED (Class change)</td> </tr> <tr> <td>9 <input type="checkbox"/> SIGNATURE REQUIRED (Class change)</td> <td>10 <input type="checkbox"/> SIGNATURE REQUIRED (Class change)</td> </tr> <tr> <td>11 <input type="checkbox"/> HOLIDAY DELIVERY (if allowed)</td> <td>12 <input type="checkbox"/> HOLIDAY DELIVERY (if allowed)</td> </tr> </table>		Priority Overnight (Delivery by 10:30 AM next business day)	Standard Overnight (Delivery by 3:00 PM next business day)	11 <input type="checkbox"/> YOUR PACKAGING	51 <input type="checkbox"/> YOUR PACKAGING	16 <input checked="" type="checkbox"/> FEDER LETTER	56 <input type="checkbox"/> FEDER LETTER *	12 <input type="checkbox"/> FEDER PAK *	52 <input type="checkbox"/> FEDER PAK *	13 <input type="checkbox"/> FEDER BOX	53 <input type="checkbox"/> FEDER BOX	14 <input type="checkbox"/> FEDER TUBE	54 <input type="checkbox"/> FEDER TUBE	Economy Two-Day (Delivery by second business day)	Government Overnight (Delivery by second business day)	30 <input type="checkbox"/> ECONOMY	48 <input type="checkbox"/> GOVT LETTER		41 <input type="checkbox"/> GOVT PACKAGE	1 <input type="checkbox"/> HOLD FOR PICK-UP (8 a.m. to 6 p.m.)	2 <input type="checkbox"/> DELIVER WEEKDAY (Not available to all accounts)	3 <input type="checkbox"/> DANGEROUS GOODS (Class change)	4 <input type="checkbox"/> DRY ICE (Class change)	5 <input type="checkbox"/> OTHER SPECIAL SERVICE	6 <input type="checkbox"/> SIGNATURE REQUIRED (Class change)	7 <input type="checkbox"/> SIGNATURE REQUIRED (Class change)	8 <input type="checkbox"/> SIGNATURE REQUIRED (Class change)	9 <input type="checkbox"/> SIGNATURE REQUIRED (Class change)	10 <input type="checkbox"/> SIGNATURE REQUIRED (Class change)	11 <input type="checkbox"/> HOLIDAY DELIVERY (if allowed)	12 <input type="checkbox"/> HOLIDAY DELIVERY (if allowed)	<p>9 DIM SHIPMENT (Chargeable Weight)</p> <p>1 <input type="checkbox"/> Regular Size 2 <input type="checkbox"/> On-Call Size</p> <p>3 <input type="checkbox"/> Drop Box 4 <input type="checkbox"/> BSC 5 <input type="checkbox"/> Station</p> <p>10 Release Signature _____ Date/Time _____</p> <p>11 Release Signature _____ Date/Time _____</p> <p>12 Release Signature _____ Date/Time _____</p>	
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REVISION DATE 8/97  
MAIL INSTRUCTIONS  
FORM 1099