

[University Name] SHIP-TO-ROOM PROGRAM

SAMPLE LABELS



SHIP TO: *SAMPLE LABELS. LABELS WITH ADDRESS WILL BE RELEASED ON SPECIFIED DATE ON WEBSITE!*

STUDENT NAME:

RESIDENCE HALL:

ROOM NUMBER:

CELL PHONE:

TOTAL ITEMS: ITEM: (EX 1 OF 3) (2 OF 3) _____ OF _____

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