

# FED-EX REQUEST FORM

Please fill out each section below completely in order to assure the safe and prompt delivery of your package(s)

PLEASE PRINT CLEARLY

## SHIPPER INFORMATION:

FULL NAME: \_\_\_\_\_

LAB AFFILIATION: \_\_\_\_\_

PHONE #: \_\_\_\_\_

7-DIGIT GRANT #: \_\_\_\_\_

OR

9 DIGIT FED-EX ACCOUNT #: \_\_\_\_\_

## RECIPIENT INFORMATION:

FULL NAME: \_\_\_\_\_

COMPANY/UNIVERSITY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE #: \_\_\_\_\_

## CHECK TYPE OF DELIVERY DESIRED:

- |                          |                    |                          |                        |
|--------------------------|--------------------|--------------------------|------------------------|
| <input type="checkbox"/> | PRIORITY OVERNIGHT | <input type="checkbox"/> | INTERNATIONAL PRIORITY |
| <input type="checkbox"/> | STANDARD OVERNIGHT | <input type="checkbox"/> | INTERNATIONAL ECONOMY  |
| <input type="checkbox"/> | FED-EX 2 DAY       |                          |                        |

PLEASE CHECK ONE:  NEED FEDEX PACKAGING  YOUR OWN PACKAGING

WEIGHT OF DRY ICE: \_\_\_\_\_ lbs. (IF INCLUDED)

TOTAL WEIGHT OF PACKAGE: \_\_\_\_\_

DETAILED DESCRIPTION OF CONTENTS: (Required for international shipments)

\_\_\_\_\_

\_\_\_\_\_

Note: If charging recipient, put in their FedEx account number. If charging your lab, put lab number/grant number/fedex acct number. Please clarify who is being charged & how in the email request.