

JSSSOFEDEX SHIPMENT REQUEST

TO: JSSSO MAILROOM SUBJECT: A	UTHORIZATION T	O USE FE	DEX SHIPPING ACC	TNUC
FROM:	DATE:			
(DEPARTMENT OR NAME) 1.) The item requires expedited shipping for the control of	☐ MISSING TRAD	NSPORTAT VERSE EFFE	ION WILL OCCUR CT TO OPERATION/ PERS	ONNEL
2.) SHIP DATE/PICK-UP:				
3.) Saturday delivery required? (NO Classified Shi	ipments on weekends)	□ YES	□ NO	
4.) Bar-coded equipment MUST be cleared the	hrough JSSSO ware	ehouse:		
5.) Is this shipment for a scheduled exercise 4a.) If so, which one?	event?	□ YES	□ NO	
6.) The following is provided for the FedEx A	ir Bill Label:			
SENDER'S NAME:	DEPT	:	_PHONE:	
RECEIVER'S NAME:	PHONE	:	(/	REQUIRED)
COMPANY/COMMAND:	MARK	ED FOR: _		
ADDRESS LINE 1: (NO P.O. BOX, NO FPO/APO ADDRESS	ES ALLOWED, MUST HAVE ST	TREET ADDRES	SSI)	
ADDRESS LINE 2:				
CITY:	S1	TATE/PRO	VINCE:	
ZIP CODE/POSTAL CODE:	CO	OUNTRY: _		
7.) Description of Item(s) to include JS Barcode a	ınd Serial Number (w	hen applic	cable):	
Domestic freight shipments cannot exceed the following dimensions; L				
Size: 1				
(L x W x H/WT) Size: 2	Tracking # 2.			
Size: 3	Tracking # 3.			
Size: 4	_ Tracking # 4.			
8.) Approved by:	DTMENT UPAN (DENUT)	VT 02 471 7-	DV DI EACE DOTALT MASS	
9.) For JSSSO Mailroom Use: Received by:				