|  |  |  |
| --- | --- | --- |
| BIO5 Final Logo2  Federal Express Form | | |
| Date: | | |
| TYPE OF DELIVERY: | | |
| Domestic – Priority, Standard, 2nd Day, or Ground | | Priority  Standard  2nd Day |
| International – Indicate Priority or Economy | | Priority  Economy |
| Bill UA  Bill Third PartySENDER’S INFORMATION: | | |
| Faculty Name: | |  |
| Sender’s Name: | |  |
| Sender’s E-Mail Address: | |  |
| Sender’s Telephone Number: | |  |
| Billing: UA KFS Account Number to charge: | | UA- |
| **Business Purpose - Must Be Completed** | | |
|  | | |
| RECIPIENT’S INFORMATION:[Note: Federal Express DOES NOT Deliver To PO Boxes] \*\* IF OUTSIDE PARTY USING OUR ACCOUNT, THEY **MUST** LIST YOUR KFS ACCT # IN THE REFERENCE FIELD OF THE WAYBILL ! | | |
| Third Party FedEx Account Number |  | |
| Reference Number (if applicable) |  | |
| Recipient’s Name |  | |
| Company/University |  | |
| Address |  | |
| City / State |  | |
| Country |  | |
| Zip / Postal Code |  | |
| Telephone Number | (     )       - | |
| E-Mail Address |  | |
| **Package Information - Must Be Completed** | | |
| Type of Package | Your packaging  FedEx Envelope  FedEx Pak  FedEx Box | |
| Package Contains (brief description) |  | |
| Number of Units |  | |
| Total Package Weight (round up lbs.) | lbs | |
| Weight of Dry Ice (if Applicable)  *(Cannot be same as total package weight)* | lbs | |
| Value of Package  (required for customs if international) |  | |
| Amount to Insure (if none, indicate) |  | |

***Please FORWARD A COPY of this form to the BIO5 BUSINESS OFFICE for billing purposes.***