

BASE NOLA FEDEX REQUEST FORM

UNIT:	
FROM:	
NAME	_____
ADDRESS	_____
PHONE NUMBER	_____
EMAIL ADDRESS	_____
TO:	
CONTACT COMPANY	_____
CONTACT NAME	_____
ADDRESS	_____
PHONE NUMBER	_____
CHECK HERE OF THIS IS A RESIDENCE? _____	
PACKAGE & SHIPMENT DETAILS:	
SERVICE TYPE (check one)	
FedEx Express Saver	_____
Other:	_____
PACKAGE TYPE (check one)	
FedEx envelope	_____
FedEx pak	_____
FedEx tube	_____
FedEx box	_____
Your package	_____
APPROXIMATE WEIGHT	_____
SHIP DATE	_____
JUSTIFICATION FOR USING FEDEX VS. REGULAR MAIL:	

