

# FedEx Shipping Request Form

## 1. From

\*Country/Location

Company

\*Contact name

\*Address 1

Address 2

\*ZIP

\*City

\*State

\*Phone no.

 ext. 

\*Email

## 2. To

\*Country/Location

Company

\*Contact name

\*Address 1

Address 2

\*ZIP

\*City

\*State

\*Phone no.

 ext. 

## 3. Package & Shipment Details

\*Weight

Service Type:

- First Overnight  Priority Overnight  Standard Overnight  FedEx Ground  FedEx 2Day

## 4. Billing Details

Account: UA-

## Additional Notes: