



جامعة فهد بن سلطان
FAHAD BIN SULTAN UNIVERSITY

COURIER SHIPPING REQUEST FORM

This form must be filled out completely, so we can process your outgoing courier shipment.

Date: / /

Sender Information

Name: _____

Department: _____

Cost center: _____

Ext.# / Mobile: _____

Content of shipment: _____

Special instructions: _____

Destination Information

Name: _____

Address: Street/building: _____

City/country: _____

P O Box: _____

Phone/Mobile: _____

Email: _____

Please sign this form and send it to the Administration office with the item to be couriered.

Signature: _____	Department signature: _____
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By signing here, you warrant that this shipment is not of a personal nature.

FBSU Office Use Only

Tracking #: _____ Weight: _____

Comments: _____

Handwritten signature: *Bat*

