

# West Texas A&M University

## Purchasing & Inventories

651-2105

Date/Time  
Field \_\_\_\_\_

### Authorization for Outgoing Freight

Department \_\_\_\_\_

Account Number \_\_\_\_\_

Number of Parcels in the Shipment \_\_\_\_\_

Contents of Shipment \_\_\_\_\_

Approximate weight of shipment \_\_\_\_\_

Value of Shipment \_\_\_\_\_

Do you want to insure the shipment?  Yes  No

If yes, for how much?

Address Label attached securely?

Package packed properly in order to avoid damage in route?

Is the shipment to be shipped:  Prepaid  Collect

Company Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Department Contact  
Name/Telephone \_\_\_\_\_

I certify the above information to be correct and hereby authorize the shipment as stated above. Chosen freight carriers may open and inspect packages before or after receipt. Carriers reserve the right to reject a shipment when such shipment would be likely to cause delay or damage to other shipments, equipment, or personnel; or if the shipment is prohibited by law.

Signature of Shipper \_\_\_\_\_

Department Head Signature \_\_\_\_\_