

TEXAS TECH UNIVERSITY

Central Receiving

Outgoing Shipments

Destination:

Mail Stop: _____

Date: _____

Account Number

Department

Prepaid _____ Collect _____

Purchase Order # _____

Department Telephone # _____

Vendor Authorization # _____

Description of Contents: _____

Purpose of Shipment: _____

(e.g., for repairs, return merchandise, etc.)

Number of Cartons: _____

Signature of Person Authorizing Shipment

INSURE FOR _____

Weight _____

(Local Vendor or Freight Lines)

Shipping Clerk

Freight Bill # _____

Date of Freight Bill _____

(SUBMIT IN TRIPLICATE)