

USDA
Form RD 2039-2
(Rev. 8-00)

INFORMATION FOR HOUSEHOLD GOODS SHIPMENT VIA GBL

Please furnish the following information for preparing a GSA cost comparison and Government Bill of Lading:

Name of Carrier	Estimated Move Date	GSA ORDER RELEASE NO.
Estimated Weight		TENDER NUMBER
Name of Employee		TRAVEL AUTHORIZATION NO.
Social Security Number		AND DATE
Address		Storage-in-Transit:
Origin _____		Origin: _____ Days
(City) _____ (Co) _____ (St) _____		<i>(NTE 90 days initially - extensions NTE 90 additional days may be granted later per regs.)</i>
Home Phone _____ Work Phone _____		
Address		Storage-in-Transit:
Destination _____		Destination: _____ Days
(City) _____ (Co) _____ (St) _____		<i>(NTE 90 days initially - extensions NTE 90 additional days may be granted later per regs.)</i>
Home Phone _____ Work Phone _____		

Is employee being limited to low cost carrier (other than carrier shown above)? YES NO

LIABILITY OF CARRIER: Please check only one:

- Released at Full Value Protection _____ (No cost to employee)
- Released at Full Value Protection with employee declared excess valuation (state Amount) \$ _____ (NFC will bill employee)

Name and Address of Moving Company:

Telephone: _____

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- PROCEDURE FOR PREPARATION : RD Instruction 2039-A
- PREPARED BY : State, Finance and National Office.
- NUMBER OF COPIES : Original only.
- SIGNATURES REQUIRED : Administrative staff handling change of station.
- DISTRIBUTION OF COPIES : Retain original in respective office.