

**REQUEST FOR SMALL PACKAGE SHIPMENT**

For use of this form, see para 1-5b, AR 25-51

**SECTION I. REQUESTING ORGANIZATION**

FROM:

POINT OF CONTACT:

E-MAIL:

PHONE:

REQUEST APPROVAL OF THE FOLLOWING SHIPMENT:  FEDEX  UPS  Registered  Certified  USPS Express

JUSTIFICATION FOR SHIPMENT:

SHIPMENT ADDRESS:

IS SIGNATURE REQUIRED BY ADDRESSEE?

YES  NO

REQUESTER SIGNATURE:

DATE:

**SECTION II. ORGANIZATION OFFICIAL MAIL MANAGER**

NAME AND PHONE NUMBER:

Approved  
 Disapproved

SIGNATURE:

DATE:

**SECTION III. OFFICIAL MAIL AND DISTRIBUTION CENTER**

NAME AND PHONE NUMBER:

Approved  
 Disapproved

SIGNATURE:

DATE: