Southeastern Louisiana University
Purchasing Department

Authorization To Pay Federal Express Charges

PART I.

Date Shipped/Received __________________________

(Check One) FEDEX Letter [ ] Package [ ]

Estimated Cost ________________ Airbill Number ______________________

Budget Unit Name To Be Charged __________________________________________

Budget Unit Number ________________ Expenditure Category ____________

Approved By ____________________________ Date ________________

Budget Unit Head

PART II.

AFFIRMATION OF RECEIPT

I certify the Federal Express service provided has been performed satisfactorily.

Shipper/Receiver ____________________________ Date ________________

Legible Signature

Note: Attach copy of airbill to AUTHORIZATION TO PAY form.

Forward completed form and airbill copy to the Purchasing Department's campus mailbox (10800) no later than (1) working day following shipment or charged delivery.