



**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 539600

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.**