

REQUEST FOR SHIPMENT OF PRINTED MATTER (Includes books, journals, documents, magnetic tape, photographs)		Turn in completed form and material to:	
SHIP TO: (Must be a complete street address, city, state, and zip code.) Consignee Name and Phone No. MANDATORY	TO BE COMPLETED BY TRANSPORTATION		
	TCN:		
	MODE OF SHIPMENT:	NUMBER AND TYPE OF CONTAINERS:	
	GBL/AIRBILL NUMBER:	WEIGHT:	
	DATE OF SHIPMENT:	PACKAGED BY:	
REMARKS: (List contents, and if special handling is required; i.e., magnetic tapes, pictures, etc.)			
FUNDING CODE MANDATORY: (Fund / Fund Center / WBS / Cost Center)		DATE REQUIRED AT DESTINATION:	
ORIGINATOR:		TELEPHONE:	DATE:
SIGNATURE: (Division Chief or higher)		MAIL CODE:	DATE:

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