AD-2059 U. S. DEPARTMENT OF AGRICULTURE					
(04-01-11) IDENTIFICATION AND AP	PROVAL OF I	NFORMATION SI	IIPPED VIA NEX	T DAY OR EXPRE	SS SERVICE
INSTRUCTIONS: If there is a Federal Ma	ilroom / Centralized	Shipping Facility at your	location, outgoing items	may be processed through	that facility. This
form may be used to enter shipments into the Physical Transportation System. Shipments shall be double sealed (when required). If the item is too large for an envelope/pouch, the package shall be appropriately banded or secured to prevent the contents from falling out during shipment.					
1. REQUESTER (Type or Print First and Last Name) 2. AGENCY				3. FACILITY LOCATION	(City/State)
☐ FSA ☐ OCIO			RMA		
		Other:			
4. ORGANIZATIONAL ENTITY (Show State/county name or provide full acronym, highest to lowest structure levels; 5. ROOM NO., CUBE AS OR MAIL STOP COD					
i.e., FSA-ITSD-ADC-PARMO)	L (As applicable)	(Include Area Code ar	iu Exterision)		
7. IDENTIFICATION AND TYPE OF INFORMATION BEING SHIPPED					
7a. DESCRIPTION OF ITEM(S) BEING SHIPPED:					
, ,					
7b. Does the shipment contain Personally Identifiable Information (PII)? No Go to Item 7d. Yes Complete blocks 7c and 7d.					
7c. STEPS TAKEN TO PROTECT THE DATA (Check as applicable) 7d. YOUR E-MAIL AD				DRESS	
☐ Electronic data has been enc		IOTE: Enter to activate the online tracking system PII data) or to receive immediate e-mail notification upon delivery.			
Shipment(s) properly and sec	urely packaged (c	louble sealed)	(Pii data) <u>or</u> to receive i	ттеатате е-тан потпсато	on upon aelivery.
☐ Other (Specify):					
8. SHIPPING ADDRESS and SERVICE REQUESTED: DO NOT use Post Office (PO) Box numbers.					
8a. COMPANY NAME or OFFICE/DIVISION					
8b. ATTENTION (Include Individual's Name and					
Stop Code, as Applicable)					
8c. BUILDING or ROOM NO.					
8d. STREET ADDRESS 8e. CITY, STATE, ZIP					
8f. DESTINATION PHONE (Include Area Code and Extension)					
8g. REQUIRED DELIVERY SERVICE (Check one):					
☐ UPS Next Day Air® (By 10:30 a.m., noon or end of day) ☐ UPS 2 nd Day Air® (By end of second business day)					
☐ UPS Next Day Air Service® (By 3 p.m. or 4:30 p.m. the next business day ☐ UPS 3 Day Select® (By the end of third business day)					
to commercial destinations) (Default Option) UPS Ground® (Day-definite delivery)					
UPS 2 nd Day Air A.M.® (By 10:30 a.m. or noon the second business day)					
8h. JUSTIFICATION FOR USING SHIPPING					
O CERTIFICATION AND ARRESTAL OF CHIRMENT BY MANACER OF RESIGNATED REPRESENTATIVE					
9. CERTIFICATION AND APPROVAL OF SHIPMENT BY MANAGER OR DESIGNATED REPRESENTATIVE					
By signing, I certify that I am aware of the contents of the shipment and am aware of the shipment's Personally Identifiable Information (PII) status (if applicable) and approve the shipment for entry into the Physical Transportation System.					
	9b. TITLE	ieai Transportation Syste	9c. SIGNATURE		9d. DATE
(19)					
10. TO BE COMPLETED BY SHIPM	ENT PROCESSO	R			
10a. NAME (Initials)10b. DATE & TIME10c. AFFIX TRACKING NO. STICKER(S) HERE					RE