FedEx Expedited Account Request Form

This form should be used to request a departmental FedEx account number. Accounts created using this form may be used online at Fedex.com/us or with paper airway bills.

Please fill in all blanks and obtain approval signature from your department manager.

Instructions on How to Register your FedEx Expedited Account are available at: http://apps.adcom.uci.edu/expresso/econtent/Content.do?resource=5203

Department Name: __________________________________________________________

Department’s Physical Address (building name and room number):
____________________________________________________________________

Contact Name: _____________________________________________________________

Email: ____________________________ Phone: ________________________________

KFS Account number to be billed for FedEx expenses related to this account: ________________

Departmental Approval

By signing below, I am confirming that I have signature authority for the account and fund listed above. I also understand that the FedEx account number must be safeguarded and that my department is responsible for all charges to this account.

__________________________________________________
Printed name of department manager

__________________________________________________ Date

Signature of department manager

When this form is completed, fax (949-824-4483) or email (palcard@uci.edu) to the PALCard Team.

(For PALCard Team use only)

FedEx Account Number _____-_____ -_____ -_____ Date _____/_____ /_____

Porcessed By __________________ Faxed to Mail Services ______

Acct# Given to Applicant: __________ Emailed Registration Instructions____

Rev 12/1/15