



From: (For HQ only) Person to contact:	To: HQ/AOC/OGS	Requisition N° Signature requesting officer: Date:
Shipping address:		Remarks:

<p style="text-align: center;">FORWARDING INSTRUCTIONS</p> <p>Date required EXW _____</p> <p><i>Departure Geneva. Add transport time to destination</i></p> <p><i>N.B. Sent by surface unless otherwise specified</i></p> <p> <input type="checkbox"/> By pouch <input type="checkbox"/> By air freight <input type="checkbox"/> By air parcel post <input checked="" type="checkbox"/> By surface freight <input type="checkbox"/> By surface parcel post </p> <p>Please use a separate form for each kind of shipment</p>	<p style="text-align: center;">(for HQ use) SHIPPING MARKS</p>
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Item N°	Code	Description	Quantity	Unit measure	(for HQ use)

ALLOTMENT N°		(for HQ use) RECAPITULATION
Earmarking N°	Obligation (Sticker N°)	Coded articles and forms
Estimated total: Sw.Fr.		Packing
Certified funds available	
Date:		TOTAL VALUE Sw.Fr.

**ORIGINAL
HQ / OGS**