

Storage Release Form

	PLEASE FILL IN	ALL INFORMATION IN THIS	BOX.	
Your Account Name		Your Account Number		
Release Date		Requested Ship Date		
Carrier Name or WC:		elease/PO#		Temp. (F):
Release To:		Ship to Address:		
Item#		Description		
Lot#		QTY:		
Notes:				
Item#		Description		
Lot#		QTY:		
Notes:				
Item#		Description		
Lot#		QTY:		
Notes:		·		
Item#		Description		
Lot#		QTY:		
Notes:		,		

The oldest lot will be pulled first unless otherwise specificed