



ALASKA AIRLINES & HORIZON AIR

Preprint Request Form

The physical address for the shipper must match the physical address as shown in our Known Shipper database.

Shipper's account number: _____ Customer ID #: _____

Shipper:		
Physical Address Only:		Phone:
City:	State:	Zip Code:

Consignee's account number: _____ Customer ID #: _____

Consignee:		
Physical Address Only:		Phone:
City:	State:	Zip Code:

Origin: _____	Destination: _____	Handling Info: _____
Nature and Quantity of Goods: _____		

Please indicate the number of air waybills being requested: _____

Preprints will automatically be sent to the Origin Cargo Station, unless otherwise specified.

<input type="checkbox"/> Other (please specify below)
Name: _____
Address: _____
City/State/Zip: _____
Attention: _____

Preprints requested by: Name: _____

Email address: _____

Phone number: _____

Send completed forms to: Alaska/Horizon Cargo Services – SEAFI
PO Box 68900
Seattle, WA 98168-0900

Or fax your request to: (206) 392 2621

Please allow 2-3 weeks for delivery. If you have any questions, please contact us at (800) 225-2752.