CARRIER CLAIM NUMBER CONCEALED DAMAGE LOSS and DAMAGE LOSS and DAMAGE CONCEALED DAMAGE HORTAGE LOSS and DAMAGE HORTAGE LOSS and DAMAGE HORTAGE LOSS and DAMAGE CLAIMANT (Carpany Name) ADDRESS CLAIMANT Carpany Name) ADDRESS CLAIMANT REFERENCE NUMBER CLAIMANTS REFERENCE NUMBER CLAIMANTS REFERENCE NUMBER CONSIGNET AREA CODE PLEASE REFER TO THIS NUMBER IN ALL CORRESPONDENCE WEST CHESTER, PA 19381 DATE THE D AREA CODE CONSIGNET RESCRIBENT INVOCCE F ADDRESS CONSIGNET SERVICE TO ATTACH LETT EXCHANATION IN TRESPONDENCE CONSIGNET ADDRESS ADDRESS CONSIGNET SERVICE TO ATTACH LETT EXCHANATION IN TRESPONDENCE CONSIGNET AND ATTACH LETT EXCHANTION IN TRESPONDENCE CONSIGNET AND ATTACH LETT EXCHANTION IN TRESPONDENCE CAMBRICA CONTRACT AND ATTACH LETT CAMBRICA CONTRACT CAMBRICA CONTRACT AND ATTACH LETT CAMBRICA CONTRACT CAMBRICA CONTRACT CAMBRICA CONTRACT CAMBRICA CONTRACT CAMBRICA CONTRACT CAMBRICA CONTRACT		TION OF SHORTAGE OR I	DAMAGE CLAIM	FOR CARRIER USE ONLY
This claim for SHORTAGE is presented to CONCEALED DAMAGE CONCEALED DAMAGE CONCEALED DAMAGE CONCEALED DAMAGE CONCEALED DAMAGE CONCEALED DAMAGE FROZEN OF HEAT DAMAGE CONCEALED DAMAGE	06555-30 (1/84)		OARDIER OLAMANIMOED	RCVG TERM SIC/DATE
This claim for SHORTAGE is presented to CONCEALED DAMAGE CONCEALED DAMAGE CONCEALED DAMAGES CONCEALED DAMAGES CONCEALED DAMAGES HORTAGE LOSS and DAMAGES FROZEN Or HEAT DAMAGE FROZEN OR HEAT DAMAGE FROZEN OR HEAT DAMAGE COMMANT (Company Name) ADDRESS CLAIMANT'S REFERENCE NUMBER CLAIMANT'S REFERENCE NUMBER CLAIMANT'S REFERENCE NUMBER IN ALL CORRESPONDENCE CONSIGNEE APPEAR AREA CODE SHIPPER CONSIGNEE ADDRESS CONSIGNEE SHIPPER CONSIGNEE STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS DESCRIPTION OF ARTICLES, INCLUDING MODEL NO, ETC. ALLOWANCE ALLOWANCE ALLOWANCE			CARRIER CLAIM NUMBER	
CONCEALED DAMAGE CONCEALED DAMAGE CONCEALED DAMAGESHORTAGE LOSS and DAMAGE FROZEN OF HEAT DAMAGE CLASSTOWN RD, P.O. BOX 564 GITY & STATE ZIP WEST CHESTER, PA 19381 DATE FILLED CLAIMANT'S REFERENCE NUMBER CITY & STATE TIP PLEASE REFER TO THIS NUMBER IN ALL CORRESPONDENCE CHY & STATE CONSIGNEE SHIPPER CONSIGNEE CONSIGNEE SHOPES CONSIGNEE STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. TERMINAL ADDRESS TERMINAL ADDRESS DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC.		VISIBLE DAMAGE	CARRIER NAME	
CONCRATED DAMAGE HORTAGE LOSS and DAMAGE FROZEN or HEAT DAMAGE FROZEN or HEAT DAMAGE CLAIMANT (Company Name) ADDRESS CLAIMANT'S REFERENCE NUMBER CLAIMANT'S REFERENCE NUMBER CLAIMANT'S REFERENCE NUMBER CLAIMANT'S REFERENCE NUMBER IN ALL CORRESPONDENCE CARNER REACHT BILLINWOICE #: BILDATE PHONE NUMBER ADDRESS SHOPPER CONSIGNEE ADDRESS CONSIGNEE ADDRESS STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS DESCRIPTION OF ARTICLES, INCLUDING MODEL NO, ETC. THE PLANT OF SHORTAGE OR DAMAGE ALLOWANCE	This claim for	SHORTAGE is presented to —	A. DUIE PYLE	
LOSS and DAMAGE FROZEN or HEAT DAMAGE CLAMMAT (Company Name) ADDRESS CLAMMAT (Company Name) ADDRESS CLAMMAT S REFERENCE NUMBER CLAMMATS REFERENCE NUMBER CLAMMATS REFERENCE NUMBER CARRIER FREICHT BILLINWOCCE #: SPL DATE PHONE NUMBER AREA CODDE SHIPPER ADDRESS CONSIGNEE ADDRESS ADDRESS STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. CITY & STATE ALLOWANCE		CONCEALED DAMAGE	TERMINAL ADDRESS	
LOSS and DAMAGE FROZEN or HEAT DAMAGE CLAIMANT S REFERENCE NUMBER CITY & STATE ZIP PLEASE REFER TO THIS NUMBER IN ALL CORRESPONDENCE CARRIER FREIGHT BILLINVOICE # BILDATE REPARANTION 1 IF THERE SHIPPER ADDRESS CONSIGNEE ADDRESS CITY & STATE TIP CITY & STATE TIP CITY & STATE TIP CITY & STATE TIP STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO. FTC. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO. FTC.		CONCEALED DAMAGE/SHORTAGE		
CLAMMANT (Company Name) ADDRESS CLAMMANT'S REFERENCE NUMBER CITY'S STATE ZIP PLEASE REFER TO THIS NUMBER IN ALL CORRESPONDENCE CARRIER FREIGHT BILLINVOICE :: DIL DATE BE SURE TO ATTACH LETT: EXPLANATION IF TRIESE ADDRESS ADDRESS CITY'S STATE ZIP CITY'S STATE ZIP CITY'S STATE ZIP STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. ALLOWANCE		LOSS and DAMAGE		
ADDRESS CLAIMANT'S REFERENCE NUMBER CITY & STATE PHONE NUMBER AREA CODE CONSIGNEE CONSIGNEE ADDRESS CONSIGNEE CONSIGNEE ADDRESS CONSIGNEE CITY & STATE STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. CITY & STATE ADDRESS CITY & STATE CITY & STAT		FROZEN or HEAT DAMAGE		
CITY & STATE ZIP PHONE NUMBER AREA CODE CONSIGNEE ADDRESS CONSIGNEE CONSIGNEE ADDRESS CONSIGNEE ADDRESS CONSIGNEE CITY & STATE ZIP CITY & STATE ZIP CITY & STATE ZIP CITY & STATE ZIP CITY & STATE CITY & STATE ZIP CITY & STATE STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. CITY & STATE ALLOWANCE	CLAIMANT (Company N	ame)	DATE FILED	
PLEASE REFER TO THIS NUMBER IN ALL CORRESPONDENCE WIT. OF SHI CARRIER FREIGHT BILLINVOICE #: BIL DATE SHIPPER CONSIGNEE ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS BE SURE TO ATTACH LEFT EXPLANATION IF THERE SPECIAL CIRCUMSTANCES SHOULD KNOW ABOUT. \$ AMOUNT CLAIMED CHECK ONE FULL VALUE REPAIR NO. OF PCS DESCRIPTION OF ARTICLES, INCLUDING MODEL NO,, ETC. ALLOWANCE	ADDRESS		CLAIMANT'S REFERENCE NUMBER	
PHONE NUMBER AREA CODE SHIPPER ADDRESS CONSIGNEE ADDRESS CITY & STATE STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. WI. OF SHI BB. SURE TO ATTACH LEFT: EXPLANATION IF THERE SPECIAL CIRCUMSTANCES SHOULD KNOW ABOUT. **AMOUNT CLAIMED CHECK ONE FULL VALUE REPAIR ALLOWANCE				
PHONE BUNDER AREA CODE SHIPPER ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS BE SURE TO ATTACH LETT EXPLANATION IF THERE SPECIAL CIRCUMSTANCES SHOULD KNOW ABOUT. \$ AMOUNT CLAIMED CHECK ONE FULL VALUE REPAIR NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. ALLOWANCE	CITY & STATE	ZIP		PONDENCE WT. OF SHPTSS
AREA CODE SHIPPER CONSIGNEE SHOULD TO ATTACH LETT EXPLANATION IF THERE SPECIAL CIRCUMSTANCES ADDRESS ADDRESS ADDRESS AMOUNT CLAIMED CHECK ONE FULL VALUE REPAIR NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. ALLOWANCE	PHONE NUMBER		CARRIER FREIGHT BILL/INVOICE #: B/L DATE	
ADDRESS AMOUNT CLAIMED CHECK ONE FULL VALUE REPAIR REPAIR ALLOWANCE ALLOWANCE				
ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS SPECIAL CIRCUMSTANCES SHOULD KNOW ABOUT. \$ AMOUNT CLAIMED CHECK ONE FULL VALUE REPAIR NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. ALLOWANCE	SHIPPER		CONSIGNEE	BE SURE TO ATTACH LETTER O EXPLANATION IF THERE AR
STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. \$ AMOUNT CLAIMED CHECK ONE FULL VALUE REPAIR ALLOWANCE	ADDRESS		Annpess	
CITY & STATE STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. CHECK ONE FULL VALUE REPAIR ALLOWANCE	ADDICESS		ADDINESS	
STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. ALLOWANCE				
STATEMENT OF SHORTAGE OR DAMAGE NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. ALLOWANCE	CITY & STATE	ZIP	CITY & STATE ZIP	FULL VALUE
NO. OF PCS. DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC. ALLOWANCE		STATEMENT OF		REPAIR
	NO. OF PCS.			ALLOWANCE
THE COUNTY HOLD TO CHE CHECK TO CHECK				_
IMPORTANT NOTE TO OUR CUSTOMERS: TOTAL AMOUNT CLAIMED- \$	IMPORTANT NO	TE TO OUR CUSTOMERS:	TOTAL AMOUNT CLAIMED-	\$

SHORTAGE CLAIMS/ITEM 1 THRU 3 • DAMAGE CLAIMS/ITEM 1 THRU 6

- Original vender's invoice (proof of purchase cost or a photostatic copy showing all the discounts. (Please include entire invoice)
- Legible copy of freight bill or original paid freight bill if available.
- 3. Original bill of lading or bond in indemnity in lieu thereof.

- 4. Carrier's inspection report, where copy has been provided.
- 5. Invoice of repair or recoopering, showing breakdown of labor by hour and rate of pay, if applicable.
- 6. Invoice of materials purchased to complete repair or recoopering, if applicable.

NOTE: in case of nondelivery or shortage it will speed conclusion if claim includes a signed statement from the consignee certifying the goods claimed short have never been received from any source and further, notification will be given to the carrier to whom this claim was presented in the event that said goods are ever received in the future.

The claimant certifies the foregoing to be correct, and agrees to indemnify the carrier against loss in the event the original Bill of Lading and/or original freight bill are not submitted.