



TRANSPORTATION CLAIM RECORD

Date Arrival Problem Reported to Carrier: _____

Arrival Problem Reported By: _____

Carrier Representative Taking Problem Report: _____

Invoice #: _____

Buyer: _____ **Destination:** _____

Product(s) Shipped: _____

Price(s): _____

Terms of Sale: Delivered (Mark as X)? YES _____ NO _____ FOB _____

Transportation Broker or Carrier: _____

Date Shipped: _____ **Hour Shipped:** _____ AM _____ PM

Date Arrived: _____ **Hour Arrived:** _____ AM _____ PM

Date Inspected: _____ **Hour Inspected:** _____ AM _____ PM

Type of Inspection: Federal _____ Buyer _____ Other _____

Restricted _____ Unrestricted _____

Number of Cartons/Amount of Product Inspected: _____

Inspection Location: _____

Pulp Temperatures: _____

Inspection Results: _____

Pictures Requested (Mark as X): Yes _____ No _____

Temperature Recorder Reading: _____

Carrier Temperature Download Reading: _____

Recorder Download Requested/(Mark as X): Yes _____ No _____



TRANSPORTATION CLAIM RECORD

Disposition of Shipment:

Full Rejection _____ **Partial Rejection** _____

Price Adjustment _____ **Consignment** _____

Other _____

Buyer Basis for Rejection/Price Adjustment: _____

Final Disposition of Shipment: _____

Notes and Comments: _____

Date Claim Sent to Carrier: _____