



Approved by the Interstate Commerce Commission; Freight Claim Division, American Railway Association; National Industrial Traffic League and the National Association of Railway Commissioners.

Name and address of Receiver (Consignee): \_\_\_\_\_

(Number and description of articles, nature and extent of loss or damage, invoice price of articles, amount of claim, etc.)

**\*\*\*PLEASE INCLUDE THE FOLLOWING WITH YOUR INITIAL REPORT\*\*\***  
***IF SOME OF THE PAPERWORK IS NOT AVAILABLE PLEASE DO NOT DELAY IN REPORTING***

- ( ) 1. Bill of Lading w /notation of wet, damaged, ripped or similar ( ) 4. Proof of Delivery if Different from BOL
- ( ) 2. Copy of Original Invoice **(Must be actual cost, no mark ups)** ( ) 5. Any Receipts showing Repair Cost
- ( ) 3. Inspection Report ( ) 6. Color Photos **(Email or Mail to PLS Claims Dept.)**

The foregoing statement of facts is hereby certified to as correct:

(Individual Completing Report) (Date Submitted to PLS)