



REQUEST FOR CLAIM PAYMENT

If you are filing your claim electronically, please complete this form online. To fax or mail your claim, please complete this form, using black ink only. Include the lesser of your **actual** cost of the merchandise, **replacement** cost or **repair** cost if repairable. Specify which cost you are including. Include your transportation charges. The preceding letter includes instructions on filing a claim and a toll free fax number for your convenience 24 hours a day. For future reference, this claim is identified by Claim Number 3989643001A, and Shipper Number 216577.

SHIPMENT TO: A/CMAVERICK VENTURES INC AGE MFG INC 10624 AVE D BROOKLYN NY 11236			
Shipper Number.....	216577	Pickup Date.....	11/08/13
Number of Parcels.....	1	Weight.....	40 LBS
Shipper Reference Number.....	24526	Tracking Identification Number...	1Z2165770347137485
Merchandise.....	ROLL OF FABRIC - 36.25 YARDS, 62 INCH LENGTH		
Could this merchandise be replaced for your customer? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
If damaged, is the merchandise repairable? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
If damaged, UPS may issue a Recovery Call Tag to take possession of the merchandise.			
Quantity	Merchandise Description	Specify Dollar Amount and Indicate Whether Actual, Replacement or Repair Cost	
442 yds	style V10401 54" white	\$1.73/lin = \$322.66	
	Roll # 4485432		
	Transportation Charges:	20.12	
	Total Amount Requested:	342.78	
Please provide a contact name and telephone number in the event further communication is necessary.			
CONTACT NAME: <i>Mike</i>		PHONE: 212-683-9300	
Please provide any additional Tracking Number(s) for the above shipment:			
Tracking Number(s):			

To File a claim by Fax:
Fax this completed Request for Claim Payment form and your other documents to: 1-888-458-7703
To File a claim by Mail:
Mail this completed Request for Claim Payment form and your other documents to:

Claims Processing Center
P.O. BOX 1265
Newport News VA 23601-1265

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