## Claimant for Reduced Price

Date:	
Claimant's Name: Address of Claimant:	
Name of Carrier: Address of Carrier:	
This claim for \$ ( against the carrier named above by connection with the following shipment(s):	&/100 dollars) is made , Claimant, for overcharge in
Description of Shipment: Name and address of Shipper: to Shipped from to Final Destination: Route Bill of lading issued by	d Via
, 19 Paid freight bill No Truck No And initials, Name and Address of recipient, Nature of Overcharge:	
DETAILED STATEMENT SHOWING HOW AMOUN Number of packages, articles rate, charges, a Dollars.	s, weight,
Authority for rate or classification claimed:	
In addition to the information given above, the follow this claim: () 1. Original Bill of lading, if not previo	<b>.</b>
() 2. Original Paid freight ("expense") b	ill.
() 3. Original Invoice or Certified Copy.	
() 4. Weight Certificate or certified state valuation.	ement when claim is based on misrouting or
() 5. Other Particulars obtainable in proof of loss or damage claimed:	

Remarks: \_\_\_\_\_

The above statement of facts is hereby certified as correct.

\_\_\_\_\_

\_\_\_\_\_e

Dated: \_\_\_\_\_\_.

CLAIMANT

## Claimant for Reduced Price Review List

This review list is provided to inform you about this document in question and assist you with its preparation. Claims for price reduction are a standard feature of most commercial businesses. This general format can be adapted to a host of different situations. The more complete the form appears, the more apt you are to get a reduction in price, whether technically merited or not.

1. Make multiple copies. Send one to the signatory by fax and/or mail. Keep one with the transaction file. Note a suitable date, such as 7 days later, to follow up by phone to finalize the result. As with all negotiations, as suggested in our disc of that name, have your end goal in mind when entering into one of these transactions.