Overage Shortage and Damage (O,S&D) Form

|  |  |
| --- | --- |
| Date: |  |
| Customer: |  |
| PO Number/Container Number: |  |
| Vendor Po Number: |  |
| Vendor Name: |  |
| Carrier: |  |
| Carrier PRO: |  |

OS & D form filed for:

Overages

Shortages

Damages

|  |  |  |
| --- | --- | --- |
| Item number | Quantity | Nature of Claim |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| Prepared by: |  |
| Job Title: |  |
| Signature: |  |
| Verified by: |  |
| Job Title: |  |
| Signature: |  |
| Pics Provided: |  |