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|  | **Claimer** | **Recipient of the claim** |
| **Name** |  | SIA “Venipak Latvija” |
| **Company code** |  | 40103483447 |
| **Address:** |  | Kalniņi B”, Mārupes pagasts, Mārupes novads |
| **Phone number** |  |  |
| **E-mail** |  | claims@venipak.com |

|  |  |  |
| --- | --- | --- |
| [ ]  **LOST SHIPMENT** | [ ]  **DAMAGED SHIPMENT** | [ ]  **FINES BY CONTRACT** |
| *Package number (i.e. V00005E0000000):* | *Package number (i.e. V00005E0000000):* | *Shipment number (i.e. 011223344):* |
| * Cost price document
 | * Cost price document
* Photos
 | * A document proofing the fine
 |

***ATTENTION! Required attachments, which are an integral part of the claim***

|  |
| --- |
| **Short, but detailed description of the claim:** |
|  |

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| --- |
| **COMMODITY TYPE** |
| [ ]  AUTO GOODS | [ ]  FOOD PRODUCTS |
| [ ]  FURNITURE | [ ]  CLOTHING AND FOOTWEAR |
| [ ]  HOUSEHOLD APPLIANCES AND ELECTRONICS | [ ]  ZOO PRODUCTS |
| [ ]  CONSTRUCTION MATERIALS AND WORK TOOLS | [ ]  CELL PHONES AND COMPUTERS |
| [ ]  COSMETICS AND HYGIENE PRODUCTS | [ ]  OTHER (filled by client):.................... |

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| --- | --- | --- | --- |
| **AMOUNT OF THE CLAIM (EUR)** |  | **Amount in words:** |  |