

REPAIR and/or REPLACEMENT QUOTE BREAKDOWN

ELITeXPO CLAIM # : _____

ELITeXPO HAWB # : _____ INSURED SHIPMENT

CUSTOMER : _____

PHONE : _____

CONTACT PERSON : _____

| DESCRIPTION | ITEM'S WEIGHT | QUOTE AMOUNT |
|-------------|---------------|--------------|
| 1) | | \$ |
| 2) | | \$ |
| 3) | | \$ |
| 4) | | \$ |
| 5) | | \$ |
| 6) | | \$ |
| 7) | | \$ |
| 8) | | \$ |
| 9) | | \$ |
| 10) | | \$ |
| 11) | | \$ |
| 12) | | \$ |
| 13) | | \$ |
| 14) | | \$ |
| 15) | | \$ |
| 16) | | \$ |
| 17) | | \$ |
| 18) | | \$ |
| 19) | | \$ |
| 20) | | \$ |

*Keep a copy for your records and mail back the original to the ELITeXPO Claims Dept.