

**U.S. Department of Justice**  
 Bureau of Alcohol, Tobacco, Firearms and Explosives

## Interstate Firearms Shipment Theft /Loss Report

	Name/FFL#	Address	Telephone Number
Shipper/Transferor			
Consignee/Transferee			
Carrier			
Shipment Tracking Number	Shipper/Carrier Claim Number		Date Shipped
Name of Reporting Company		Federal Firearms License Number <i>(If applicable)</i>	
Full Name and Position of Person Making Report <i>(Please print)</i>			Date
Email Address of Shipper or Person Making Report		Signature of Person Making Report	

Firearm(s) Description *(Use reverse side if additional space is needed)*

Type	Manufacturer	Model	Caliber	Serial Number	Date Acquired

Shipment Description

Individual Parcel                       Shrink Wrapped Pallet  
 Pallet                                       Other *(Describe):* \_\_\_\_\_

Brief Summary of Incident:

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Shipper/Transferor FFL is required by law to submit ATF Form 3310.11. Completed forms can be mailed, emailed or faxed. For more information, call toll free: 888-930-9275

MAIL THIS FORM TO: U.S. DEPARTMENT OF JUSTICE NTC - LESB - SFP 244 NEEDY RD. MARTINSBURG, WV 25405	E MAIL THIS FORM TO: <a href="mailto:STOLENFIREARMS@atf.gov">STOLENFIREARMS@atf.gov</a> FAX THIS FORM TO: 304-260-3676 or 304-260-3671
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**Paperwork Reduction Act Notice**

This request is in accordance with the Paperwork Reduction Act of 1995. The information collection documents reports of theft or loss of firearms experienced by common carriers in interstate shipment. ATF uses the information to investigate and perfect criminal cases. The information requested is voluntary.

The estimated average burden associated with this collection of information is 20 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be addressed to Reports Management Officer, Document Services, Bureau of Alcohol, Tobacco, Firearms and Explosives, Washington, DC 20226.