

Interstate Firearms Shipment Theft /Loss Report

	Name and FFL#	Address	Telephone Number
Shipper/Transferor			
Consignee/Transferee			
Carrier			
Shipment Tracking Number	Carrier Claim Number <i>(if available)</i>		Date Shipped

Name of Reporting Company _____

Full Name and Position of Person Making Report <i>(Please print)</i>	Telephone Number	Date
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Email Address of Shipper or Person Making Report	Signature of Person Making Report
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Firearm(s) Description (Use ATF Form 3310.11A Continuation Sheet additional space is needed)

Type	Manufacturer	Model	Caliber	Serial Number	Date Acquired

Some or all of the stolen/missing inventory listed above falls within the purview of the National Firearms Act *(NFA)*.

Shipment Description

Individual Parcel Shrink Wrapped Pallet
 Pallet Other *(Describe):* _____

Brief Summary of Incident: _____

Shipper/Transferor FFL is also 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: STOLENFIREARMS@atf.gov 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.