

Summary Report for Individual Task  
551-88N-2103  
Prepare a Transportation Discrepancy Report (TDR)  
Status: Approved

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**Distribution Restriction:** Approved for public release; distribution is unlimited.

**Destruction Notice:** None

**Foreign Disclosure: FD1** - The materials contained in this course have been reviewed by the course developers in coordination with the Fort Lee, VA foreign disclosure authority. This course is releasable to students from all requesting foreign countries without restrictions.

**Condition:** In an operational environment, given shipment document, a blank DD Form 361 (Transportation Discrepancy Report (TDR), and DTR 4500.9-R, Part II, this task will be performed under supervision.

**Standard:** Prepare a DD Form 361 without error, for the loss and damage of shipments IAW DTR 4500.9-R, Part II.

**Special Condition:** None

**Safety Risk:** Low

**MOPP 4:**

<b>Task Statements</b>
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**Cue:** None

<b>DANGER</b>
None

<b>WARNING</b>
None

<b>CAUTION</b>
None

**Remarks:** None

**Notes:** None

## Performance Steps

1. Enter Julian date TDR is prepared. (Block 1)
2. Enter Report Number. (Block 2)  
Note: This number is made up of the reporting activity's Department of Defense Activity Address Code (DODAAC) followed by the last two digits of the year the report was created and a four digit sequential number.
3. Enter the name and address including the ZIP Code of the office to which the Request for Information (RFI), miscellaneous or Astray Freight TDR will be mailed. (Block 3)
4. Enter the name and address including ZIP Code of the reporting activity. (Block 4)
5. Enter the CONSIGNOR: name and address including ZIP Code of the activity that directed the shipment. (Block 5)
6. Enter the CONSIGNEE: name and address including ZIP Code of the activity that is receiving the shipment. (Block 6)
7. Enter the SHIPPER: name and address including ZIP Code of the activity making the shipment for the consignor. (Block 7)
8. Enter the CARRIER'S complete name and SCAC. (Block 8)
9. Enter the CARRIER'S PRO/FREIGHT BILL NO: the number from the carrier's delivery receipt. (Block 9)
10. Enter the BILL Of LADING NO./TYPE: the number and indicate the type. (Block 10)
11. Enter the correct MODE OF SHIPMENT CODE. (Block 11)
12. Enter the Julian date the carrier signed for the shipment. (Block 12)
13. Enter the Julian date on which the consignee signed for the shipment. (Block 13)
14. Enter the Julian date on which the discrepancy was discovered. (Block 14)
15. Enter the Julian date on which the commercial carrier was first notified. (Block 15)
16. Enter the name and telephone number of the carrier's agent contacted. (Block 16)
17. Place an "X" in the proper block and show the seal number. (Block 17)
18. Show the Transportation Control Number assigned to identify the material. (Block 18)
19. Enter the item name (COMMODITY DESCRIPTION) and NSN or part number. Include the member's/employee's name and grade on personal property shipments. (Block 19)
20. Enter the TYPE PACK CODE. (Block 20)
21. Show the number of pieces reported as DISCREPANT for each line entry. (Block 21)
22. Enter the TYPE and CAUSE CODE. (Block 22)
23. Show the two-letter abbreviated (UNIT OF ISSUE) under which the material was issued. (Block 23)

24. Show the total number of UNITS BILLED/SHIPPED that were shown on the billing or shipping document. (Block 24)

25. Enter the number of UNITS OF ISSUE that were found to have discrepancies. (Block 25)

26. Show the total WEIGHT for each discrepant line entry. (Block 26)

27. Enter the REPLACEMENT value. (Block 27)

28. Enter the REMARKS. (Block 28)

Note: Request information needed to the investigation of the discrepancies.

29. Enter the Name of Preparer, Email Address, Telephone and FAX Number. (Block 29a - 29d)

30. Enter any Reply. (Block 30)

31. Enter Name of Respondent, Email Address, Telephone and FAX Number. (Block 31a - 31e)

TRANSPORTATION DISCREPANCY REPORT (TDR)		1. DATE	2. REPORT NUMBER		OMB No. 0702-0124 OMB approval expires Feb. 28, 2009		
		110					
<small>The public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Executive Services Directorate (0702-0124). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO: SDDC, ATTN: MTDC-OPCL, 661 SHEPPARD PLACE, FORT EUSTIS, VA 23604.</small>							
PART I							
<input type="checkbox"/> REQUEST FOR INFORMATION (RFI)		<input type="checkbox"/> MISCELLANEOUS PROBLEMS		<input type="checkbox"/> ASTRAY FREIGHT			
3. TO		4. REPORTING ACTIVITY 598TH US ARMY TRANSPORTATION TERMINAL APO AE 09143					
5. CONSIGNOR (Origin) FLEET AND INDUSTRIAL SUPPLY CENTER NORFOLK, VA 23511-5000		6. CONSIGNEE (Destination) CDR. EUROPEAN DISTRIBUTION AAFES - EUROPE APO AE 09143		WK3FOY			
7. SHIPPER SAME AS BLOCK 5		8. CARRIER'S NAME (SCAC) SL INDEPENDENCE A4929 W1SQL1 4020 V0331N2					
9. CARRIER'S PRO/FREIGHT BILL NO. N/A		10. BILL OF LADING NO./TYPE N/A					
11. MODE CODE Z	12. DATE CARRIER SIGNED FOR SHIPMENT	13. DATE CONSIGNEE RECEIVED SHIPMENT	14. DATE DISCREPANCY DISCOVERED 116	15. DATE CARRIER NOTIFIED	16. CARRIER REPRESENTATIVE CONTACTED MR. HARRY SMITH TELEPHONE NO. (215) 465-0960		
17. SEAL NUMBERS AND CONDITION <input checked="" type="checkbox"/> INTACT <input type="checkbox"/> BROKEN/MISSING (Include details) <span style="font-size: 2em;">▶</span>							
TRANSPORTATION CONTROL NO. 18	COMMODITY DESCRIPTION AND/OR NATIONAL STOCK NO. (NSN) 19	TYPE OF PACK 20	QUANTITY DISCREPANT (Pieces) 21	TYPE AND CAUSE CODE 22	ISSUE DATA		VALUE OR COST OF REPAIRS 27
					UNITS BILLED 23	UNITS SHIPPED 24	
HX8AAUTOAT	POTATO CHIPS 8940-00-A27	CD	17	SK			
HX8AAUTOAT	TORTILLA CHIPS 8940-00-A27	CD	4	SK			
28. REMARKS (See preparation instructions of covering regulation for suggested information)							
SHIPMENT WAS LOADED ON ABC TRUCKING NO. 01234, 20 APR 10, BLOCKED AND BRACED WITH TWO-FOOT 4X4'S NAILED TO THE TRAILER FLOOR ON ALL FOUR SIDES OF THE BOX							
29a. NAME OF PREPARER (Type or print) RONDA A. FORTSON				29b. EMAIL ADDRESS TRANSPORTATION OFFICER			
29c. TELEPHONE NO. (703) 428-2294		29d. FACSIMILE NUMBER					
30. REPLY							
31a. NAME OF RESPONDENT (Type or print)				31b. TELEPHONE NO.			
31c. EMAIL ADDRESS		31d. FACSIMILE NUMBER		31e. DATE			
DD FORM 361, JUN 2006							
REPLACES STANDARD FORM 361 (3-84) WHICH IS OBSOLETE.							
Reset <small>Adobe Professional 7.0</small>							

DD FORM 361, Transportation Discrepancy Report (Front)

32. Enter name and address including ZIP Code of the finance center or claim office or contract administration office to which the TDR package is to be mailed. (Block 32)

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PART II - (FOR CLAIMS PURPOSES)

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32. TO:

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33. EXCEPTION NOTED ON CARRIER'S DELIVERY RECEIPT? (if "NO," explain in Remarks)

YES       NO

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<p>34. INSPECTION DATA</p> <p><input type="checkbox"/> CARRIER INSPECTED <i>(Report attached)</i></p> <p><input type="checkbox"/> ORAL WAIVER <i>(Provide name, title, and date in Remarks)</i></p>	<p><input type="checkbox"/> INSPECTION WAIVED <i>(Waiver attached)</i></p> <p><input type="checkbox"/> GOVERNMENT INSPECTED <i>(Report attached)</i></p>
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<p>35. DISPOSITION DATA</p> <p><input type="checkbox"/> REJECTED <i>(Receipt attached)</i></p> <p><input type="checkbox"/> OTHER <i>(Explain in Remarks)</i></p>	<p><input type="checkbox"/> REPAIRED AT GOVERNMENT EXPENSE <i>(Bill attached)</i></p>
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36. REMARKS *(See preparation instructions of covering regulation for suggested information)*

SAMPLE

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37. ATTACHMENTS

<p><input type="checkbox"/> CY BOL</p> <p><input type="checkbox"/> CY CARRIER'S TENDER</p> <p><input type="checkbox"/> CY CARRIER'S DELIVERY RECEIPT</p> <p><input type="checkbox"/> PHOTOGRAPH</p> <p><input type="checkbox"/> CARRIER'S INSPECTION REPORT</p>	<p><input type="checkbox"/> DD FORM 1348-1</p> <p><input type="checkbox"/> CY DD FORM 250</p> <p><input type="checkbox"/> ACTUAL REPAIR COST COMMODITY</p> <p><input type="checkbox"/> OTHER _____</p> <p><input type="checkbox"/> OTHER _____</p>
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38. ACCOUNTING CLASSIFICATION

DD Form 361, Transportation Discrepancy Report (Back)

33. Place an "X" in the proper Block and complete required remarks for Blocks 33 to 37.

34. Enter the Accounting Classification. (Block 38).

(Asterisks indicates a leader performance step.)

**Evaluation Guidance:** Score the Soldier GO if all performance steps are passed. Score the Soldier NO-GO if any performance steps are failed. In case of a NO-GO, brief the Soldier on the deficiency, retrain the Soldier to perform the step correctly, and reevaluate the task.

**Evaluation Preparation:** None

PERFORMANCE MEASURES	GO	NO-GO	N/A
1. Entered Julian date TDR is prepared. (Block 1)			
2. Entered Report Number. (Block 2)			
3. Entered the name and address including the ZIP Code of the office to which the Request for Information (RFI), miscellaneous or Astray Freight TDR will be mailed. (Block 3)			
4. Entered the name and address including ZIP Code of the reporting activity. (Block 4)			
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15. Entered the Julian date on which the commercial carrier was first notified. (Block 15)			
16. Entered the name and telephone number of the carrier's agent contacted. (Block 16)			
17. Placed an "X" in the proper block and show the seal number. (Block 17)			
18. Showed the Transportation Control Number assigned to identify the material. (Block 18)			
19. Entered the item name (COMMODITY DESCRIPTION) and NSN or part number. Include the member's/employee's name and grade on personal property shipments. (Block 19)			
20. Entered the TYPE PACK CODE. (Block 20)			
21. Showed the number of pieces reported as discrepant for each line entry. (Block 21)			
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24. Showed the total number of UNITS BILLED/SHIPPED that were shown on the billing or shipping document. (Block 24)			
25. Entered the number of UNITS OF ISSUE that were found to have discrepancies. (Block 25)			
26. Showed the total weight for each DISCREPANT line entry. (Block 26)			
27. Entered the REPLACEMENT value. (Block 27)			
28. Entered the REMARKS. (Block 28)			
29. Entered the Name of Preparer, Email Address, Telephone and FAX Number. (Block 29a - 29d)			
30. Entered any Reply. (Block 30)			
31. Entered Name of Respondent, Email Address, Telephone and FAX Number. (Block 31a - 31e)			
32. Entered name and address including ZIP Code of the finance center or claim office or contract administration office to which the TDR package is to be mailed. (Block 32)			
33. Placed an "X" in the proper Block and complete required remarks for Blocks 33 to 37.			
34. Entered the Accounting Classification. (Block 38)			

**Supporting Reference(s):**

Step Number	Reference ID	Reference Name	Required	Primary
	DD FORM 361	TRANSPORTATION DISCREPANCY REPORT (TDR)	Yes	No
	DTR 4500.9-R-II	Cargo Movement	Yes	No

**Environment:** Environmental protection is not just the law but the right thing to do. It is a continual process and starts with deliberate planning. Always be alert to ways to protect our environment during training and missions. In doing so, you will contribute to the sustainment of our training resources while protecting people and the environment from harmful effects. Refer to FM 3-34.5 Environmental Considerations and GTA 05-08-002 ENVIRONMENTAL-RELATED RISK ASSESSMENT. Environmental protection is not just the law but the right thing to do. It is a continual process and starts with deliberate planning. Always be alert to ways to protect our environment during training and missions. In doing so, you will contribute to the sustainment of our training resources while protecting people and the environment from harmful effects. Refer to FM 3-34.5 Environmental Considerations and GTA 05-08-002 ENVIRONMENTAL-RELATED RISK ASSESSMENT.

**Safety:** In a training environment, leaders must perform a risk assessment in accordance with ATP 5-19, Risk Management. Leaders will complete the current Deliberate Risk Assessment Worksheet in accordance with the TRADOC Safety Officer during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW FM 3-11.4, Multiservice Tactics, Techniques, and Procedures for Nuclear, Biological, and Chemical (NBC) Protection, FM 3-11.5, Multiservice Tactics, Techniques, and Procedures for Chemical, Biological, Radiological, and Nuclear Decontamination. In a training environment, leaders must perform a risk assessment in accordance with FM 5-19, Composite Risk Management. Leaders will complete a DA Form 7566 COMPOSITE RISK MANAGEMENT WORKSHEET during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW FM 3-11.4, NBC Protection, FM 3-11.5, CBRN Decontamination.

**Prerequisite Individual Tasks :** None

**Supporting Individual Tasks :** None

**Supported Individual Tasks :** None

**Supported Collective Tasks :**

Task Number	Title	Proponent	Status
55-1-1016	Provide Traffic Management for Cargo Being Shipped from Port of Embarkation	55 - Transportation (Collective)	Approved
55-5-0033	Provide Cargo Documentation Support for the Export of Unit Equipment and Supplies	55 - Transportation (Collective)	Approved
55-5-0034	Process Movement Requests	55 - Transportation (Collective)	Approved
55-5-0032	Provide Cargo Documentation Support for the Import of Unit Equipment and Supplies	55 - Transportation (Collective)	Approved

**ICTL Data :**

ICTL Title	Personnel Type	MOS Data
Transportation Management Coordinator 88N MOS ICTL	Enlisted	MOS: 88N

MOS 88N - Transportation Management Coordinator SL2	Enlisted	MOS: 88N, Skill Level: SL2
MOS 88N - Transportation Management Coordinator SL3	Enlisted	MOS: 88N, Skill Level: SL3
MOS 88N - Transportation Management Coordinator SL 4	Enlisted	MOS: 88N, Skill Level: SL4