

CLAIM FORM

MELROSE

PLEASE EMAIL: claims@melroseintl.com
or FAX: (888) 219-4577

Phone: 217.222.2144
Fax: 217.222.5588
Toll Free: 800.282.2144

DATE: / /

ACCOUNT #:

INVOICE #:

INVOICE DATE: / /

SOLD TO:

COMPANY OWNER'S NAME

MAILING ADDRESS ZIP

ITEM #	QTY	PRODUCT DESCRIPTION	ISSUE	PRICE	ACTION
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WE APOLOGIZE FOR ANY ISSUES WITH YOUR SHIPMENT. YOUR HELP IN COMPLETING THIS FORM IS APPRECIATED.