## **General Claim Sheet**



Thank you for contacting **abm**. It has come to our attention that the product you purchased from us did not work to your expectations. In order for us to solve this case to your complete satisfaction, please fill out the questionnaire below and submit along with all other relevant data attached to technical@abmgood.com.

\*Please open this form with Adobe Acrobat, Adobe Professional, FoxIt or some other alternatives in order for the save function to be available. Adobe Reader does not support the save function.

Order Infor	mation					
Cat. #		Lot. #		Invoice #		
Date Received		Date Delivered		Claim Date		
Product Description						
-	nformation					
Name			Telephone			

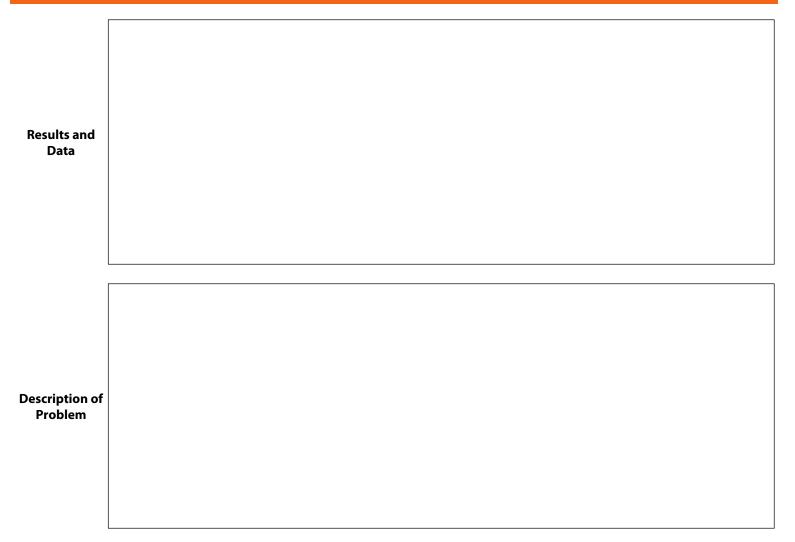
Company/ Institution		
institution		

## Product usage details and descriptions

Purpose	
Storage Conditions	
Method Description	

## **General Claim Sheet**

## Product usage details and descriptions (continued)



Thank you in advance for your assistance. Please email this form and all relevant data to technical@abmgood.com. If you have further inquiries or concerns feel free to email us at technical@abmgood.com.