

Quick Claim Form

To receive a credit, this form must be filled out completely. Fax form and carrier's delivery receipt to **800.947.0377** for Matthews Paint, Lacryl, Field Master and Series 20 products or **773-646-5793** for 1-Shot products. Or email form to your Matthews Paint customer service rep. Quick Claim Forms are available at **www.matthewspaint.com**.



Note: Red shaded areas are for Matthews Paint use only.

Company _____ Contact _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Customer PO # _____ MPC Order # _____

Freight Carrier _____ Pro # _____

Discount %	Customer #	CM Code
------------	------------	---------

ORDERED			TYPE OF CLAIM						
			DAMAGED	LOST	SHORT SHIPPED	CREDIT MEMO	RECEIVED IN ERROR		REBILL
Product Code	Size	Qty	Qty	Qty	Qty	\$ Each	Product Code	Qty	\$ Each
Total							Total		

Was the order received "Subject to Count and Inspection" on the freight company's copy? Yes No	Was the complete shipment refused? Yes No
Was the shrink wrap intact? Yes No	If incorrect products were received, do you want to return these items? Yes No
Was the shrink wrap clear with fluorescent labels containing the words "STOP - If seal is broken check contents before receiving"? Yes No	If so, please provide RGA # in space below.

Credit Memo #
Rebill #
Warehouse Instructions