

Customer Claims Form

SHANGHAI PI CHEMICALS CO.,LTD

* Claims No.: _____

Date: _____

Regular fields are required so that we can help you fulfill your request.

Company/Institute: _____

Customer Account No.: _____

Full Name: _____

Title: _____

Phone: _____

Fax: _____

Email: _____

PO No.: _____

Product Number: _____

Chemical Name: _____

CAS No.: _____

Invoice No.: _____

Please type your inquiry:

Please fill in this form, and fax to 86-21-58953701. Call 86-21-58953700 for questions.

* Leave the claims number blank, we'll fill it.

Shanghai PI Chemicals Co.,Ltd

Building B, 633 E Shan Road,
Pudong New Area, Shanghai 200127,China

Phone: 86-21-58953700 Fax: 86-21-58953701

Email: sales@pipharm.com

Website: www.pipharm.com