

Customer Claim Form



Customer ID# _____	Customer Contact Name _____
Company Name _____	Phone _____
Avery Dennison Sales Order # _____	Email _____
Evaluation Requested? (Y/N) _____	
Credit Requested? (Y/N) _____	Customer Reference # _____
Corrective Action Letter Needed? (Y/N) _____	Credit Dollars Requested _____

PLACE ROLL TAGS HERE *(Material Quality Issues only)*



**Please send 5-10 feet of converted & unconverted samples with affected areas marked.
Please submit photos in lieu of samples for transit damage, roll formation & incorrect labeled width**

DESCRIPTION OF ISSUE

Example: Laminate wrinkles, near the core, 200' involved

Issue Description: _____

Issue Location in Material: _____

Affected Quantity (# of rolls or footage if less than full roll) _____

For fastest response, please mail samples along with this completed claim form to:

**Avery Dennison, Label & Graphic Materials - NA
Attention: Material Quality Consultant
8080 Norton Parkway, Mail Stop 22-B
Mentor, OH 44060**