

Customer: _____

Address: _____

Fax: _____

Pages: _____

Attn: **Health and Safety Officer**

Date: _____

Attached/following is a Material Safety Data Sheet for a product you recently purchased from us. Please distribute this information to ensure the safe and proper handling of this product by your employees and customers.

Product:	Supplier
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Safety Officer

Pacific Coast Chemicals

initials _____