

COMPLAINT FORM

Reference No.

Part I filled by the person making the complaint.

Name and address of the company:

Item	Index	Colour	Quantity	Cause of complaint	Purchase invoice	Way of handling the complaint

Date and legible signature of the person making the complaint:

Date and legible signature of the person accepting the complaint

Date and legible signature of the warehouse operative:

Part II filled in by the producer.

Notes:

1. Quality control (date and signature)
2. Complaint was handled (date and signature)
- 3.

Date and signature of the Production Manager