

Complaint Sheet

Complaint Sheet Number (for our use):	
Company Details	
Company Name:	
Contact Person:	
Position at the Company:	

Date of Delivery:	
Servicing:	
Payment terms:	
Unit Price:	
Item (P/No and Quality)	

Purchase Date:	
Invoice number:	

Description of the Problem

Answer of the Problem

Corrective Actions

Did the customer was satisfied with the answer? If not, which solution do you recommend? (Answers below)