



CUSTOMER COMPLAINT FORM

CUSTOMER & STOKIS/DEALER INFORMATION

*Customer Name :	Complaint No :
*Customer Address :	
*Contact No. :	*ID No :
*Complaint Date:	*Stokis/Dealer Name :

COMPLAINT INFORMATION

*Product Name & Production Date / Batch No. :		Details Delivery :	
*Reason		Requisition Quantity :	
Solution :		Remarks :	

sila kosongkan ruangan di bawah untuk kegunaan HQ JRM

ISSUED BY :

APPROVED BY :

ACKNOWLEDGMENT BY :

Name :

Name :

Name :

Date :

Date :

Date :

Dept :

Dept :

Dept :