CLIENT'S COMPLAINT REPORT FORM

Part A - To be filled by Steelpress				
Application numbe	Application		date	
Part B – To be filled by the submit	ting party			
Data of the company making the notifica	ition:			
N (11 11 11 11 11				
Name of the person making the notific	ation:			
Object of complaint (catalogue name an	d index)			
Quantity of products being questionedpcs.				
Date of purchase of the advertised proceept:		Number of invoice	ce/sale	
Description of reported defect:				
Circumstances of observing the defect:				
Request of the person making the complain	int:			

List of losses sustained:	
Attached documents:	
Signature of the person making the notification notification	Signature of the person receiving the