INTERN OFFICE QUALITY COMPLAINT MEMO

Date: _____ IFQCM # _____

To, Manager, Melissa Mayor, Quality Control., Unit – I From, Manager, John Carter, Production. , Unit – 1B

The following Materials are identified:

Name of Customer	Job Order No. & Date	Material Defects / Complaint Raised on Production Stage

Product Description		

Nature of complaint		
Product Description		
Nature of Defects Identified		

Sender Sign	Received by:	_Sign
Date of Re-inspection	Inspection Conduct by:	Sign

Format No. Rev. No. Rev. Date