## LABORATORY > SAMPLE COMPLAINT REGISTER

Rev. No. Rev. Date.	
Name of Unit:	Month of Complaints:
Record Holder:	Sign.

Complaint No.	Complaint Date	Job Order No.	Job Order Date	Sender / Client Name	Complaint Received from	Quantity Under Complaint	Complaint Details	Investigation Details		Status of Complaint
								Date replied	Investigation Record No.	
								- 1		