

# Quality Review Followup Action sheet

Date of Action Sheet : \_\_\_\_\_ Record Holder: \_\_\_\_\_

Quality Review Date: \_\_\_\_\_ Target of Completion Date: \_\_\_\_\_

| Identified Action Requirements | Particulars of Follow-up | Referance Code | Location | Remarks |
|--------------------------------|--------------------------|----------------|----------|---------|
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Format No.

Rev. No.

Rev. Date.

Verified & Approved by