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| **SECTION 1: DETAILS** | **REFERENCE NUMBER:** |
|   |  |  |  |  |  |  |  |  |   |
| Department responsible: |   | PRODUCTION |   | MAINTENANCE  |   | DISTRIBUTION |   |   |
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| Category: | Comment: |   | Complaint |   | Formal |   | Quality |   |   |
|   |  |   |  |   | complaint |   | warning |   |   |
|   |  |  |  |  |  |  |  |  |   |
|   |  |  |  |  |  |  |  |  |   |
| Received by: |   |   |  | Date received: |  |   |  |   |
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| Regarding: |   |   |   |  | Due date: |  |   |  |   |
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| **SECTION 2: ACTION/REQUEST** |
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| **SECTION 3: PROCEDURE FOLLOWED** |
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| **SECTION 4: ACTION/S TAKEN TO PREVENT REOCURRENCE:** |
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| **SECTION 5: CORRECTIVE ACTION COMPLETED:** |
| **DATE** | **TIME**  | **PERSON RESPONSIBLE:** | **MANAGEMENT:** | **DATE:** |
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