

Supplier complaint (NCR-L)	we-ef
	FB-0154.1

Supplier details: <i>to be completed by the operating department</i>	
Supplier:	
NCR No.:	RB
Date:	

Details WE-EF <i>to be completed by the operating department</i>	
WE-EF:/ Department:	
Contact person:	
WE-EF Order No.:	
Date of delivery / Bill of delivery:	
Delivered quantity:	
Faulty quantity:	
Product code:	
Product description:	
Drawing nummber:	

Description of problem <i>to be completed by the operating department</i>

Proposed appropriation <i>to be completed by the quality assurance</i>			
Responsible QS:			

Use decision <i>to be completed by the purchasing department</i>

Additional Informations <i>to be completed by the operating department</i>