## **Stationery Complaint Form**

Upon receipt of the form at NHS Supply Chain, the Customer Service Advisor will allocate a unique reference number to the incident and register the issue the same day with the appropriate Supplier.

Please complete the form clearly and in as much detail as possible and email to your Customer Service Advisor.

<b>Contact Details</b>			
Contact Name:		Position:	
Telephone No:		Fax No:	
Email:			
Order Details			
District ref/Trust Name:			
Hagnital Nama			
Hospital Name  Delivery Address			
Delivery Address			
		Postcode	
Requisition point:		Requisition numbers	
Delivery date of item	Depot Se		
		Deperson out	
Product Details		D 1	
Product code:		Brand:	
Product description:			
Pack Size:			
Batch No/Lot No or	Use by date/Best before date:		
Traceable code:			
Description of complaint			
Purchase Order Number			
For NHS Supply Chain use only:			
Reference No.:		Date received:	
CSA Name		Date sent to supplies	·