GLOBAL ENFORCEMENT SOLUTIONS LTD
COMPLAINTS RECORD FORM

Record Number:		**Date of Complaint:**	

Customer:	

Written Complaint:		**Telephone Complaint:**	

Description of Complaint:

Complaint Investigated by (name):	

Methods by which complaint investigation was carried out:

Corrective Actions Required: ***Date Implemented:*** ***Implemented by:*** ***Confirmed Effective (Date):***

Complainant Notified (Date):	