

SUGGESTION FOR IMPROVEMENT

Date:

Page

of

ORIGIN:	☐ Client	☐ Supplier	☐ Intern Employee No.:		
DETECTED PROBLEM OR ACTIVITY:					
SUGGESTIO	ON/ PROPOSAL:				
JOGGESTIN	JN/ FROFOSAL				
ANALYSIS OF SUGGESTION:					
ACTIONS T	ОТАКЕ			ANSW.	TIME
D : !!					
Revised by:					