



BORANG ADUAN PELANGGAN/COMPLAINT FORM

Nama Pengadu /
Complainant's Name : _____

No. Matrik / *Matric Number* : _____

Alamat / *Address* : _____

No. Tel (H/P) / *Phone Number (Mobile)* : _____

No. Telefon Pejabat / *Office Phone Number* : _____ No. Faks / *Fax Number* : _____

Emel / *Email* : _____

Organisasi / *Organisation* : _____

ADUAN/DETAILS OF COMPLAINT

THANK YOU

FOR OFFICE USE

Nama Penerima /
Complaint received by : _____ No. Rujukan /
Reference No. : _____

Masa / *Time* : _____ Tarikh Terima /
Date Received : _____

No. Tel /
Phone No. : _____

