

Complaint Form

Complaint Processing

Complainant (if not anonymous):

Name: _____ Affected Production/Area: _____

Phone: _____ Date: _____

Email: _____

Anonymous Complaint

Relationship with Aurora:

External: Internal: First Complaint: Follow-up Complaint:

Complaint Submission Method:

Direct Complaint

Complaint Mechanism

Quality Manager

Employee

Sustainability Officer

Other

Method of Complaint Receipt:

Phone

In Person

Letter

Email

Severity: _____

Urgency: _____

Content of the Complaint:

Details of the Complaint:

Assigned to: _____ Date: _____

Extent to which Aurora caused, contributed to, or is connected to the complaint.

Relevant Corrective Actions:

Review of Implemented Corrective Actions:

Date: _____

Attachments: _____