

| <b>1 COMPLAINT INTERNAL FORM</b><br><br>BAGIAN : <u>WEB</u><br>NO CIF : <u>002/WEB/III/2023</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | NO. MRN/TO : <u>TORL/23/0371</u><br>NAMA BARANG : <u>HVS ROLL 70 82 PAPER PINDOPLUS</u><br>TOTAL QTY : <u>1.042</u><br>NO. JOB : <u>230346</u><br>TANGGAL : <u>08-03-2023</u> |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
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| <b>2</b><br><div style="border: 1px solid black; padding: 2px; display: inline-block; margin-bottom: 5px;">JENIS BARANG</div> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input checked="" type="checkbox"/> KERTAS ROLL</div> <div style="width: 50%;"><input type="checkbox"/> BAHAN PENOLONG</div> <div style="width: 50%;"><input type="checkbox"/> COVER</div> <div style="width: 50%;"><input type="checkbox"/> UMUM</div> <div style="width: 50%;"><input type="checkbox"/> KERTAS SHEET</div> <div style="width: 50%;"><input type="checkbox"/> ACCESSORIES EFK</div> <div style="width: 50%;"><input type="checkbox"/> SPAREPART</div> <div style="width: 50%;"><input type="checkbox"/> .....</div> <div style="width: 50%;"><input type="checkbox"/> TINTA</div> <div style="width: 50%;"><input type="checkbox"/> PLATE</div> <div style="width: 50%;"><input type="checkbox"/> ATK</div> </div>                                                                                                                                                                                                                                                                          |                                                                                                                                                                               |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <b>3 JENIS COMPLAINT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                               |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">COMPLAINT QUALITY (KHUSUS KERTAS)</th> <th style="width: 50%;">COMPLAINT NON QUALITY</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> FLUI</td> <td><input type="checkbox"/> CORE KENDOR</td> </tr> <tr> <td><input type="checkbox"/> BERDEBU</td> <td><input type="checkbox"/> CORE RUSAK</td> </tr> <tr> <td><input type="checkbox"/> LENGKET</td> <td><input type="checkbox"/> BASAH</td> </tr> <tr> <td><input type="checkbox"/> POTONGAN KASAR</td> <td><input type="checkbox"/> SOBEK PINGGIR</td> </tr> <tr> <td><input type="checkbox"/> CACAT COATING</td> <td><input type="checkbox"/> PENYOK AKIBAT BENTURAN</td> </tr> <tr> <td><input type="checkbox"/> PANJANG - PENDEK</td> <td><input type="checkbox"/> ROBEK/TERSODOK FORKLIFT</td> </tr> <tr> <td><input type="checkbox"/> BERGARIS</td> <td><input type="checkbox"/> QUANTITY KURANG</td> </tr> <tr> <td><input type="checkbox"/> SAMBUNGAN JELEK</td> <td><input type="checkbox"/> SALAH KIRIM BARANG</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> LAIN - LAIN .....</td> </tr> </tbody> </table> |                                                                                                                                                                               | COMPLAINT QUALITY (KHUSUS KERTAS)                                                                                                                                  | COMPLAINT NON QUALITY                                                                                                                                                 | <input checked="" type="checkbox"/> FLUI | <input type="checkbox"/> CORE KENDOR | <input type="checkbox"/> BERDEBU | <input type="checkbox"/> CORE RUSAK | <input type="checkbox"/> LENGKET | <input type="checkbox"/> BASAH | <input type="checkbox"/> POTONGAN KASAR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> SOBEK PINGGIR | <input type="checkbox"/> CACAT COATING | <input type="checkbox"/> PENYOK AKIBAT BENTURAN | <input type="checkbox"/> PANJANG - PENDEK | <input type="checkbox"/> ROBEK/TERSODOK FORKLIFT | <input type="checkbox"/> BERGARIS | <input type="checkbox"/> QUANTITY KURANG | <input type="checkbox"/> SAMBUNGAN JELEK | <input type="checkbox"/> SALAH KIRIM BARANG | <input type="checkbox"/> LAIN - LAIN ..... |  |
| COMPLAINT QUALITY (KHUSUS KERTAS)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | COMPLAINT NON QUALITY                                                                                                                                                         |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <input checked="" type="checkbox"/> FLUI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> CORE KENDOR                                                                                                                                          |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <input type="checkbox"/> BERDEBU                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> CORE RUSAK                                                                                                                                           |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <input type="checkbox"/> LENGKET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> BASAH                                                                                                                                                |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <input type="checkbox"/> POTONGAN KASAR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> SOBEK PINGGIR                                                                                                                                        |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <input type="checkbox"/> CACAT COATING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> PENYOK AKIBAT BENTURAN                                                                                                                               |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <input type="checkbox"/> PANJANG - PENDEK                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> ROBEK/TERSODOK FORKLIFT                                                                                                                              |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <input type="checkbox"/> BERGARIS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> QUANTITY KURANG                                                                                                                                      |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <input type="checkbox"/> SAMBUNGAN JELEK                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> SALAH KIRIM BARANG                                                                                                                                   |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <input type="checkbox"/> LAIN - LAIN .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                               |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <b>4 *CATATAN KHUSUS KERTAS ROLL</b><br><table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 33%;">NOMOR ID ROLL</th> <th style="width: 15%;">QTY</th> <th style="width: 52%;">KET' RUSAK</th> </tr> </thead> <tbody> <tr> <td>75166295</td> <td>532</td> <td>FLUI</td> </tr> <tr> <td>75158604</td> <td>510</td> <td>FLUI</td> </tr> </tbody> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | NOMOR ID ROLL                                                                                                                                                                 | QTY                                                                                                                                                                | KET' RUSAK                                                                                                                                                            | 75166295                                 | 532                                  | FLUI                             | 75158604                            | 510                              | FLUI                           | <b>5 *CATATAN KHUSUS KERTAS SHEET</b><br><div style="margin-top: 5px;"> <div style="display: flex; justify-content: space-between;"> <div>           1. KODE LOT NUMBER<br/>           2. KERTAS SUDAH TERCETAK(HASIL CETAK OK)<br/>           3. KERTAS SUDAH TERCETAK(HASIL CETAK NG)<br/>           4. KERTAS BELUM TERCETAK UK' TO/MRN(PLANO)<br/>           5. KERTAS BELUM TERCETAK UK' SUDAH TERPOTONG X<br/>           6. ....         </div> <div style="text-align: right;"> <div style="border: 1px solid black; width: 80px; height: 20px; margin-bottom: 5px;"></div>           :..... RIM<br/>           :..... RIM<br/>           :..... RIM<br/>           :..... RIM<br/>           :..... RIM<br/>           * TOTAL QTY KERTAS :..... RIM         </div> </div> </div> |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| NOMOR ID ROLL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | QTY                                                                                                                                                                           | KET' RUSAK                                                                                                                                                         |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| 75166295                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 532                                                                                                                                                                           | FLUI                                                                                                                                                               |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| 75158604                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 510                                                                                                                                                                           | FLUI                                                                                                                                                               |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <b>6 PROBLEM (NON KERTAS) :</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>7 USULAN :</b>                                                                                                                                                             |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <b>8 CATATAN GUDANG :</b><br><div style="margin-top: 5px;"> <div style="display: flex; justify-content: space-between;"> <div>NO. PO</div> <div>PO/22/1883</div> <div>NO.DO</div> <div>1261698943</div> </div> <div style="margin-top: 5px;">PT.CAKRAWALA MEGA INDAH</div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                               |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <b>9</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                               |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <b>PELAPOR/USER</b><br>08-03-2023<br><div style="border: 2px solid green; padding: 5px; display: inline-block; margin-top: 10px;">APPROVED</div><br>( Feri Andrian )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>MENGETAHUI</b><br>08-03-2023<br><div style="border: 2px solid green; padding: 5px; display: inline-block; margin-top: 10px;">APPROVED</div><br>( Sogol Heri )              | <b>WAREHOUSE</b><br>09-03-2023<br><div style="border: 2px solid green; padding: 5px; display: inline-block; margin-top: 10px;">APPROVED</div><br>( Yudi Setianto ) | <b>PURCHASING</b><br>10-03-2023<br><div style="border: 2px solid green; padding: 5px; display: inline-block; margin-top: 10px;">APPROVED</div><br>( Maurina Gurning ) |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |
| <b>NOTE : SETELAH DIISI MOHON DIKEMBALIKAN KE GUDANG</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                               |                                                                                                                                                                    |                                                                                                                                                                       |                                          |                                      |                                  |                                     |                                  |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |                                        |                                                 |                                           |                                                  |                                   |                                          |                                          |                                             |                                            |  |

COPY : 1. WAREHOUSE

2. PURCHASING

3. USER