

Name: _____ Date: _____

handling of complaints

1. PMTIOSNACL _____
2. SUEGT _____
3. LOOPYAG _____
4. SORCESMTU _____
5. ILEMS _____
6. OEPILT _____
7. TNSIEL _____
8. CAML _____
9. NTOAIC _____
10. TTNNTIOAE _____