SECTION 1 – DESCRIPTION OF ISSUE

DATE OF DISCOVERY:

TYPE OF COMPLAINT (preliminary): ☐ Export Control ☐ Other Regulatory

DESCRIPTION:

Other Contributing Circumstances:

Applicable Regulation:

Has Anything Been Done to Remedy This Issue: ☐ Yes ☐ No

SECTION 2 – STAFF / FACILITY INFORMATION

PROJECT:

DEVICE:

LOCATION OF ISSUE:

REPORTER’S NAME:

REPORTER’S TEL:

Complete First 2 Sections & Submit To: Export Control Organizational Point Of Contact

SECTION 3 – INVESTIGATION

Date Of Investigation:

Investigator’s Name:

Investigator’s Tel:

INVESTIGATION RESULTS / ROOT CAUSE:

SECTION 4 – ACTION PLAN

TYPE OF COMPLAINT: ☐ ITAR ☐ EAR ☐ FACR ☐ Other Regulatory

ACTION PLAN

TASKS COMPLETE

ACTIONS VERIFIED

Include Corrective & Preventive Actions:

REPORTABLE: ☐ Yes ☐ No; see attached rationale

SECTION 5 – APPROVALS

The above action plan is acceptable.

This complaint has been resolved appropriately, all associated tasks are complete and the actions have been verified.

EC POC: Date: EC POC: Date: