



# F.010 PREVENTIVE ACTION REPORT FORM

<b>F.010 No.</b>	
<b>Date of Report</b>	
<b>F.006 No.</b>	
<b>F.007 No.</b>	
<b>Audit No.</b>	
<b>Initiator</b>	

<b>Description of Problem</b> (Use another sheet if required)	
<b>Action Assigned To</b>	
<b>Action(s) taken to correct and contain problem</b> (Use another sheet if required)	
<b>Action(s) taken to prevent reoccurrence</b> (Use another sheet if required)	
<b>Validation and evidence of effectiveness</b> (Use another sheet if required)	
<b>Action closure date</b>	
<b>Action closed by (sign and print)</b>	
<b>Follow up required?</b>	