Refusals Register

Please record all refusals on the register below

NO.	Date	Project	Time	Name of Persion or Description	Observations	Staff Member
01						
02						
03						
04						
05						
06						
07						
08						
09						
10						
Managers Signature:					Date:	

Juul Labs

Refusals Register

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NO.	Date	Project	Time	Name of Persion or Description	Observations	Staff Member
01						
02						
03						
04						
05						
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Managers Signature:					Date:	