Entity Number: ☐

Date Received: ☐☐/☐☐/☐☐☐☐ (day / month / year) **FTO in-charge:** _____

1. **Enquirer**: Female ☐ Male ☐
2. **Enquirer**: Consumer ☐ Trader ☐
3. **Enquirer Name (optional)** _____
4. **Mode Received**:

   Telephone ☐ _____ In person ☐ Email ☐ _____ Written ☐
5. **Location Island:**

   Upolu ☐ Savaii ☐ Manono ☐
6. **Location Address:** _____
7. **Nature of Enquiry:** CP ☐ POPU ☐ CX ☐ FTA ☐ OB ☐ FC ☐ NFTM ☐

Details of Enquiry:

_____
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Details of Outcome:

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8. **Outcome:** Aref ☐ CLOR ☐ CPBRI ☐

Date Close: ☐☐/☐☐/☐☐☐☐ (day / month / year)