

CUSTOMER SATISFACTION SHEET

CUSTOMER: NHS Lothian
ORDER NO: GC15125
SITE: MUSSELBURGH PRIMARY CARE CENTRE
INVERESK ROAD
EH21 7BP

SUPPLY AND INSTALL: Room 17
1 x VERTICAL BLIND (N) Ready

CARRIED OUT BY:
DATES:

I CONFIRM THAT THE ABOVE WORK HAS BEEN CARRIED OUT TO MY SATISFACTION

NAME: Hayley Hogg

SIGNATURE: *Hayley Hogg*

POSITION: Nurse assistant Practitioner

DATE: 09/09/25

WORK COMPLETE YES/NO
ANY FURHER INFORMATION :-