**Please fill in the required fields at minimum.

Description**: Enter in brief description of the defect					
Severity**: Please select one: 1 – Critical; 2 – High; 3- Medium; 4 - Low		**Product:**		**User ID:**	
Detected by**:		**Test Case Name**:**			

Steps**: Please provide the necessary steps to recreate the defect.

Expected Results:

Actual Results**:

Comments: