**Document Review Feedback Template**

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| **Document Title** |  |
| **Version** |  |
| **Author** |  |
| **Reviewer** |  |
| **Date Reviewed** |  |

**Instructions for Reviewer**

1. Complete details in table above.
2. Include initials in the comments table below. This will assist the author if they wish to merge the comments from all reviewers into one document.
3. Reference the page, paragraph and line if possible, when providing comments.
4. Leave Author’s Response column blank.

**Instructions for Author**

1. Collate comments onto one document if you wish (this will ensure that duplicated comments are more easily noticeable).
2. Please provide a response to each comment and whether you have accepted or rejected the suggested amendment. If you reject a comment, please explain why.

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| **Comment Number** | **Reviewer Initials** | **Line, Paragraph, Page No.** | **Comment and Suggested Amendment**  **(if applicable)** | **Author’s Response** |
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