This CVF must be complete by each sales person or account manager by hand, every month and be with your line manager by 2nd of the month Legend: Put a cross in the corresponding box if you have visited your client. Put a tick in the box if you have not visited, but spoken to your client.

Client Visitation Form (CVF 001)

Month		W	eek or	ne			W	/eek tv	wo		Week three					Week four					Week five				
Client Name or reference	Mon				Fri	Mon				Fri	Mon				Fri	Mon				Fri	Mon				Fri
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