

Firm Name

Product name

All Lots

Please check ALL appropriate boxes.

- I have read and understand the recall instructions provided in the <date> letter.
- I have checked my stock and have quarantined inventory consisting of _____ <units or cases>.
- Indicate disposition of recalled product:
 - returned (**specify quantity, date and method**)/held for return;
 - destroyed (**specify quantity, date and method**);
 - relabeled (**specify quantity and date**);
 - quarantined pending correction (**specify quantity**);
 - transfused – Blood or blood products (**specify date and quantity**);
 - implanted (**specify date and quantity**)
- I have identified and notified my customers that were shipped or may have been shipped this product by (**specify date and method of notification**); <or>

Attached is a list of customers who received/may have received this product. Please notify my customers.

Any adverse events associated with recalled product? Yes NO

If yes, please explain: _____

Please check the appropriate box(es) to describe your business

- wholesaler/distributor retailer
- grocery corporate headquarters food service/restaurant
- repacker manufacturer
- pharmacy retail hospital/medical facility hospital pharmacies medical laboratory
- Other: _____

Name: _____

Title: _____

Tel. number: () _____

Name

Title

Enclosure(s)