RECALL EFFECTIVENESS CHECK

Tr	nis is, I am calling from _			
(Your name)		(Company name)		
to	determine if you were aware of our company's recall of			
		(Product Description	n, with Codes, and Rea	ason)
Ma	ay I please speak with	? On	w	e sent
	(Key Company Contact)	(Date)		
nc be	otification to all companies which may have received this	product. Stating	g that all product	should
(In	dicate what they were told to do)			·
۱h	nave the following questions to ask you regarding the red	all:		
Yc	our Name: Your Title			
1.	Did your company receive notification of this recall	?	YES 🗌 1	NO 🗌
2.	Did your company receive shipments of this production (if NO, terminate questions and close)	ct?	YES 🗌 1	NO 🗌
3.	Do you have any of the recalled product(s) on hand (Can you please check your inventory before asking?)	!?	YES 🗌 1	NO 🗆
4.	Have you or do you intend to		associated p	roduct?
	(state what they were suppose			NO 🗌
5.	Have you received any complaints associated with	the product?	YES 🗌 1	NO 🗌
lf [*]	YES, please provide details:			
Signed:		Date:		
Reviewed Bv		Date:		

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