CONSUMER COMPLAINT RECORD

In ODA Regulated Facilities Grocery stores, meat markets, warehouses, bakeries, food processors and dairies Use this form to report complaints about products and facilities.

Make <u>all</u> reports of food borne illness to your county Health Department

Date Complaint Reported:		
Report received by: Web page		
Complainant's Name:		
Complainant's Address:		
City: Zip:	Phone:	

Facility (sanitation/employee) or Product Item Complaint

Facility name/or where product purchased:
Facility address:
Product Item:
Date of purchase or incident:
Brand:
Mfg/Distributor:
Product Code/Size/
Describe unusual appearance/odor seals intact, etc.
Complaint Summary: