

Willamette Valley Pie Company - RECALL RETURN RESPONSE FORM

DATE: _____

Customer Name: _____ Product Description: _____
Title: _____
Firm Name: _____ Product Lot Code: _____
Address: _____
City/State: _____ Product Quantity: _____
Tel # _____

Please check appropriate boxes if applied to you:

- I have read and understand the recall instructions provided in the Recall Notice Letter.
- I labeled, re-packed, reprocessed, or made new products that receive a thermal kill step that eliminates pathogens from my food. I will or have contacted the FDA Recall Coordinator in my state to verify (<http://www.fda.gov/Safety/Recalls/IndustryGuidance/ucm129334.htm>).
- I labeled, re-packed, reprocessed, or made new products that did NOT receive a thermal kill step to eliminate pathogens from my food. I will or have contacted the FDA Recall Coordinator in my state as I may have to initiate my own recall (<http://www.fda.gov/Safety/Recalls/IndustryGuidance/ucm129334.htm>).
- I have checked my stock and I have no more remaining inventory subject to the Recall Notice.
- I have checked my stock and I have inventory consisting of _____ units.
- Indicate disposition of recalled product:
 - Returned (specify quantity, date and method) or held for return;
 - Destroyed (specify quantity, date and method);
 - Quarantined for return or correction (specify quantity);
- I have identified and notified my customers that were shipped or may have been shipped the following products (specify product, quantity and notification date)

- 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
- Manufacturer Private Consumer Other: _____

PLEASE FAX, EMAIL, or MAIL COMPLETED RESPONSE FORM TO:

Recalling Firm's Name: Willamette Valley Pie Co, LLC
Address: 1651 Eska Way, Silverton, OR 97381
EMAIL: info@wvpie.com