



It's all about managing food.

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COMPLAINT INVESTIGATION

Complaint Number: _____ Date of Complaint: _____

How did you become aware of the problem (e.g. customer complaint)?

What is the source of the problem (e.g. human error or equipment breakdown)?

Other Affected Products?

Product Name: _____ Size: _____
Code on Package: _____ UPC: _____
Product Name: _____ Size: _____
Code on Package: _____ UPC: _____
Product Name: _____ Size: _____
Code on Package: _____ UPC: _____

Corrective Actions Taken:

Contacted Manufacturer (If Applicable):

Company Name: _____ Spoke With: _____
Date: _____ Time Reported: _____ am [] pm []

Contacted Regulatory Agency:

Agency Name: _____ Agency Phone: _____
Spoke With: _____
Date: _____ Time Reported: _____ am [] pm []

Completed By: _____ Date: _____ Time: _____ am [] pm []

Reviewed By Member of Management Team: [] Date: _____ Time: _____ am [] pm []