|  |  |  |  |
| --- | --- | --- | --- |
| Date: | Start Time: | End Time: | Mock Recall Result: PASS / FAIL |
| **Recall Team Members Present** |
|  |
| **Contact Information Confirmation** |
| 1. Recall Team Lead
 |  |
| 1. Senior Manager/Owner
 |  |
| 1. FDA/USDA Recall Coordinator
 |  |
| 1. Certifying Body
 |  |

|  |  |
| --- | --- |
| Enter Company Logo HereEnter Company Address Here |  **Mock Recall Form** |
| Document #: | Effective Date: |
| Author: Kellerman Consulting | Supersedes: N/A |
| Approved By: | Revision #: Original |

|  |
| --- |
| **Materials Impacted** |
| Product Name |  | Material Code: |  |
| Batch/Lot Number |  |
| Quantity of WIP or finished product produced (weight)? |  |
| Date and Dispatch Location(s) |  |
| Delivery/Invoice Number |  |
| Total on Hand |  |
| Confirmed Total (Physical Count) |  |

|  |
| --- |
| **Determination of Control and Disposition (Return, Divert, Disposal)** |
|  |

|  |
| --- |
| **Mock Recall Exercise Results** |
| Percent Recovery (%) |  |
| Percent unaccounted for (%): |  |
| Reason for unaccountable product/material: |  |
| Corrective Action (if failed result): |  |
| Reviewed & Approved By: |  |

|  |  |
| --- | --- |
| Enter Company Logo HereEnter Company Address Here |  **Batch Record Form** |
| Document #: | Effective Date: |
| Author: Kellerman Consulting | Supersedes: N/A |
| Approved By: | Revision #: Original |
| **Batch Information** |
| Date: |  | Batch Quantity: |  |
| Finished Product Name: |  | Batch Lot Code: |  |
|  |
| **Ingredient/Material** | **Supplier Lot Code** | **Quantity/Weight** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Batch Prepared By: (name/date)** |  |
| **Record Reviewed By: (signature/date)** |  |