

USDA Foods Complaint Form

Complete and email this form, photos of product and any other information you think may be useful to
commodityfoods@education.ohio.gov

*IRN# _____ *School or Institution: _____ *Date of Complaint: _____

Contact Information

*Name: _____

*Phone#: _____

Address: _____

City + Zip Code: _____

Product Information

*Product Item#: _____

*Description: _____

*Lot Number: _____

*Date Received: _____

Quantity: _____

Sales Order#: _____

Food Complaint

☐ Quality ☐ Foreign Material ☐ Packaging ☐ Cooking or Preparation ☐ Causes Allergy

Was there an injury or illness as a result? _____

*Description and preferred Resolution: _____

Warehouse Complaint

*Description and preferred Resolution: _____

Program Complaint

*Description and preferred Resolution: _____

***Anything with an asterisk must be completed.**

Ohio Department of Education and Workforce, Office of Nutrition Use ONLY

Forwarded to: _____

Resolution/Follow-Up _____

Verified By: _____

Date: _____