

Address

Date:

Supersedes:

Mock Recall

Date:

Initialed by:

Total Time:

Item:

PO#:

Lot#

Cheese inbound

Date received:

Cheese Outbound

Date Shipped:

Cheese inventory

% accounted

JWI

- Conduct annually and identify corrective action if +/- 100%

Address

Date:

Supersedes:

Artisan Dairy Producer Food Safety Initiative