

**Kentucky Department of Agriculture**  
**USDA Foods Complaint Form**

*Complete and return this form to KDA Food Distribution Division. You may email to our office.*  
**Information needed to file complaint is marked with an asterisk (\*).**

\*Agency Name:

\*Contact Person:

\*Contact Phone:

\*Contact Email:

\*Complaint Description:

\*WBSCM Sales Order #:

\*USDA Foods Material ID #:

Vendor/Product Name:

Pack Date:  Best If Used by Date:

\*Quantity Affected (in Cases):  Lot/Can Code:

\*Delivery Date:  \*Illness/Injury? (Y/N):

\*Remaining Qty on Hand (in Cases):

\*Location of Affected Product:

\*Seek Replace/Reimburse? (Y/N):  \*Isolated Incident? (Y/N):

Other: