

FARM NAME \_\_\_\_\_

DOC 3.23 Form for Designated Recall Team Structure and Responsibilities\*

**Recall Team**

**Date Assigned**

**ASSIGNMENT** **PERSON** **CONTACT INFORMATION**

Senior Operations Manager

Alt. Manager

Publicity & Public Relations

Alt:

Marketing Specialist

Alt:

Scientific Advisor

Alt:

Logistics and Receiving Specialist

Alt:

Quality Assurance Specialist

Alt:

Accountant

Alt:

Attorney

Alt:

Administrative Support

24-hour Food delivery

Taxi Service

Miscellaneous

\*The Food Recall Manual, University of Florida