

POTENTIAL AND ACTUAL RECALLS/CRS INCIDENTS

1. EP CASE NO.

2. CASE NAME

3. CRS NO. *(N/A in recall situations)*

4. REPORTING UNIT *Science:*

☐ CHEMISTRY ☐ EPIDEMIOLOGY ☐ FIELD SERVICES LAB ☐ RESIDUE ☐ MICROBIOLOGY

OFO / OPHS:

☐ DEO ☐ EMERGENCY RESPONSE ☐ DIO ☐ DISTRICTS ☐ TECHNICAL SERVICE

5. NATURE OF INCIDENT

6. PHASE

☐ INVESTIGATIVE

☐ RECALL

7. WEEK ENDING

8. FINAL REPORT

☐ YES ☐ NO

9. PREPARED BY

10. COSTS	THIS WEEK	CUMMULATIVE	11. SAMPLES ANALYZED	THIS WEEK	CUMMULATIVE
a. Personnel	\$	\$	a. Food Chemistry		
b. Travel <i>(per diem, common carriers, mileage etc., included in cost)</i>	\$	\$	b. Microbiology		
c. Purchases/Samples	\$	\$	c. Residue		
d. Shipping/Handling	\$	\$	d. Pathology		
e. Lab Costs <i>(Lab Hours x Hourly Rate)</i>	\$	\$	e. TOTAL SAMPLES		
f. Contract Lab Expenses by non-Federal Lab	\$	\$	12. PERSONNEL HOURS		
g. Other Costs <i>(specify)</i>	\$	\$			
	\$	\$	a. In-plant/Comp. Offc'rs		
	\$	\$	b. Staff & Support		
	\$	\$	c. Science (Headquarters)		
	\$	\$	d. Science Lab Hours		
			e. TOTAL HOURS		
			13. REMARKS		
h. TOTAL COST	\$	\$			