

CCOF

CCOF

Organic Certification

2155 Delaware Ave., Suite 150

Education & Outreach

Political Advocacy

Promotion

Fax: (831) 423-4528

Phone: (831) 423-2263

COMPLAINT FORM-DAIRY ISSUES

This complaint form may be used to file a complaint or submit an allegation against a CCOF member for violations of USDA/NOP and or CCOF Global Market Access program standards. If you feel that you have witnessed, or have evidence that a CCOF client is engaged in the application of a prohibited material, misleading or fraudulent labeling, commingling of conventional and organic product, or other violations of the standards, please fill out this form.

CCOF investigates complaints as per CCOF Manual One, a Guide to Certification. CCOF conducts such investigations confidentially and <u>based only on documented evidence</u>. The complainant should know that every CCOF client has the right to a complete and fair investigation and review of the complaint by CCOF, as well as the right of appeal CCOF's decision.

Please complete this form as accurately as possible. Your complete and accurate information will help us investigate this complaint quickly and efficiently. You must sign and date the complaint. You may send the complaint form to:

Santa Cruz, CA 95060 Email: inbox@ccof.org Complaint Information: Your Name: Email: Address: Phone: Do you want your name to be confidential during CCOF's investigation of this complaint? ☐ Yes ☐ No. Please note, even if you indicate that you want your name to be held confidential you must submit your name and contact information as required by USDA/NOP and or CCOF Int'l standards. While CCOF can keep your name confidential for the purposes of CCOF's investigation, CCOF cannot ensure that your identity would remain confidential in the event that CCOF records were subpoenaed by a court of law or requested by subsequent county, state, or federal investigators.) What is your complaint? Please tell us what you observed and what evidence you have to support your allegation. Please clearly provide specific information regarding when, where, and your complaint alleges. Attach records or photographs you may have as evidence and attach additional written pages if necessary. You may attach additional pages as necessary. If you are or were an employee of this operation please describe your job and job title:

ALLF06 V1. R3 08/26/2014

For CCOF certified dairy operation complain		ST be completed:
Date of Observation(s):	Time of Observation:	AM/PM (circle one)
How long were you there?	What was the temperature:	
Describe the weather during your ENTIRE of	bservation:	
From what EXACT location did you make ea to nearest cross street and enough addition		
Are there any signs, markers, or landmarks	that CCOF could use	to identify the fields you observed?
Please describe the location of observed fie	lds in relation to the	main road and milking barns?
What did you observe in the fields in question	on? Be extremely tho	prough and specific.
Did you observe other livestock on grass at where and at what exact time?	the same time at oth	er operations? If so, which ones,
THIS COMPLAINT FORM MUST BE SIGNED By my signature I attest that the information pro-		ırate to the best of my knowledge:
Signature:	Date:	

ALLF06 V1, R3 08/26/2014 Page 2 of 2