Date
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# **DoD Fresh Produce Program Complaint Form**

Use this form to report any concerns that you have with produce quality, condition, availability, or delivery with our DoD vendor, Stern Produce. Please provide as much detail as possible and return this form to ADE School Food Programs <a href="USDAFoods@azed.gov">USDAFoods@azed.gov</a>

# **General Information**

Name	Date of Delivery
Contact Name	Time of Delivery
Telephone	Quantity Affected
Email	Quantity Remaining
<b>.</b>	
<u>Nature</u>	e of Complaint
Please provide a detailed description of the i Fresh Produce Program.	ssue that you had while participating in the DoD

		Date
Photo 1	ocumentation	
Please utilize this space to attach photo doc		
	al Information	
Is there any additional information that you  If we please include:	wish to include that was not indic ny additional information here.	cated on this form
ii yes, pieuse meiude	ry additional information note.	

Date	

# **Contact Information**

Please contact us if you have any questions or concerns!

## Regan Garner

ADE Health and Nutrition Services DoD Fresh Program Specialist (602) 364-1973 Office (602) 542-3818 Fax Regan.Garner@azed.gov

## Tonya Keyes-Christianson

Director of School Foods Programs Arizona Department of Education (602) 642- 6208 Office Tonya.keyeschristianson@azed.gov

### **Christian Winton**

Stern Produce – Distributor Account Manager 480-476-5636 Cell cwinton@sternproduce.com

#### Sonia Leon

Stern Produce-Distributor Retail Sales Manager (623) 694-2846 Office sonia@sternproduce.com schools@sternproduce.com