← Back to Event List (/events)

Event Name: Topco Market Withdrawal, Full Circle Organic Peanut Satay Sauce, 03/09/2022

Event ID: 24767

♠ Overview

i Overview

- ₽RINT ALL PRODUCTS (/REPORTS/OVER-VIEW?ID=24767&TYPE=PDF)
- **★** SHIPPING INFO CSV (/REPORTS/SHIPPING-INFO?EVENT_ID=24767&TYPE=CSV)
- **▲** STARTER INFO (/REPORTS/COMPANY-CONTACT?ID=24767&TYPE=XLS)

Classification:	Withdrawal	Informational Website:		Effective Date:	2022-03-09
Reason:	Other	Consumer Hotline:		Notification Period:	2 Hours
Warehouse Disposition:	Dispose at your discretion	Transportation Disposition:	Dispose at your discretion	Point-of-Sale Disposition:	Dispose at your discretion
Customer Status:	affected	Regulating Agency:	None		

i Reason and Description

Spoilage causing the bottles to bulge and have an off-flavor. This is not a food safety issue.

No Attachment

i Additional Notes

Please work with the Topco sourcing contact David Bizub (dbizub@topco.com) on questions regarding replacement product.

Please also report any quantities removed through Recall InfoLink for regulatory traceability.

No Attachment

Products

Products Showing 1-1 of 1 item.

➡ TAKE-ALONG WORKSHEET

Reporting Location	UPC	Case UPC	Add'l Item #	Description	Pack	Size	Lot Code	lr
Spokane WA	036800389687	003680038968	10026531	Full Circle Organic Peanut Satay Sauce 12oz	12	12 oz	5/11/2023	(
4								•

♣ Reports

← Reports

EVENT OVERVIEW XLS	EVENT OVERVIEW PDF	Summary data - product(s), customer(s), instructions, times
MFR CONTACT INFO XLS	MFR CONTACT INFO PDF	Contact information for the manufacturer.
RMA REPORT XLS	RMA REPORT PDF	Return merchandise authorization to include in returns.
SHIPPING INFO CSV	Shipments to your locati	on(s), if provided.

Starter Contact Information

Supplier Information

Company:

Chelten House

City:

Postal Code:
08014
Address Line 1:
State or Province:
NJ
Phone:
Address Line 2:
Country:
United States of America
Facility Registration Number:
Coordinator Information
Name:
Parichard Sangern
Phone 1:
847-329-3203
Email:
recalls@topco.com
Title:
Recall Coordinator
Phone 2:
Media Information
Name:
Phone:
Email:

Bridgeport