



**PRODUCT QUALITY/INCIDENT REPORT**  
**2020 Fall Product Program**

**Report Details**

Date of this Report \_\_\_\_\_  
Complainant \_\_\_\_\_ Registered GS Adult?  Yes  No  
Address \_\_\_\_\_  
Telephone (Day) \_\_\_\_\_ Email \_\_\_\_\_  
Are there any children in the household?  Yes  No Age(s) \_\_\_\_\_  
Complaint / Incident \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**GSGLA Discovery Details**

Region \_\_\_\_\_ Service Unit \_\_\_\_\_ Troop # \_\_\_\_\_  
Date of Discovery \_\_\_\_\_ Product involved \_\_\_\_\_  
Has can been discarded?  Yes  No Code # from Product \_\_\_\_\_  
Date of Purchase \_\_\_\_\_ Date of Receipt by Customer \_\_\_\_\_  
Purchased by \_\_\_\_\_ Received by \_\_\_\_\_  
Product Replaced?  Yes  No Date Replaced \_\_\_\_\_  
Replaced with? \_\_\_\_\_ Refund approved? \_\_\_\_\_  
Call / Report Taken by: \_\_\_\_\_

**Office Use Only**

CEO & CERO Notified?  Yes  No Date Notified \_\_\_\_\_  
Trophy Nut Notified?  Yes  No Date Notified \_\_\_\_\_  
GSUSA Notified?  Yes  No Date Notified \_\_\_\_\_