

The I Can't Eat "THAT" Club

IS THIS PRODUCT SAFE FOR ME?

Name of Product: _____

Name of Company: _____

Phone #: _____

Address: _____

Questionable Ingredients: _____

Questions:

Does this product contain GLUTEN?

(Circle one)

YES NO ??? Trace Amount Cross Contamination?

Does this product contain Milk Products?

YES NO ??? Trace Amount Cross Contamination?

Other Products: _____

Does your company have a Gluten or Milk Free list?

Date: _____