



FoodSafe & Quality Systems Audit Release

I [Auditee Representative] of [Auditee Company] do hereby give authorization to Process Management Consulting (Auditor) to release one (1) original signed copy of the FoodSafe Audit Report to each of the companies so designated by the auditee representative at the address listed below for each FoodSafe Audit conducted on [Date] at the facility located at [Street Address] in [City, State].

Auditee Company and Representative	
Company:	Location:
Name:	Title:
Signature:	Date:
Telephone:	E-mail:

Designated Company to receive FoodSafe & Quality Systems

Attention:	
Company:	
Mailing Address:	
Telephone:	
E-mail:	

All opinion letters produced by Process Management Consulting services are of a confidential nature and may contain information that is considered proprietary by the auditee. Reports are not released to 3rd Parties without the prior written consent by the auditee representative.