Customer Response Form

Please complete this form *even if you do not have any affected stock.*

CRITICAL RECALL

TGA Reference Number: RC-2026-RN-00836-1

BioPractica ImmunePro Plus (AUST L 393514) 60 Tablets

Batches: 41309, 43660, 45266, Expiry Dates: 28/02/2027, 31/03/2028, 30/01/2029

On behalf of this organisation, I acknowledge receipt of the recall notice dated 22 October 2026, relating to the above product.

FROM:

Organisation	
Position	
Name	
Email or fax no.	
Telephone no.	
Date	
Signature	

Affected Stock

If you have **no affected** stock, tick this box: ☐

If you have affected stock, please complete the stock details table below.

Product	**Batch/Lot/Date**	**Quantity of stock received**	**Quantity of unused stock subject to recall (currently in quarantine)**
Total affected product			
Other Relevant Details:			

Other organisations

Has your organisation supplied potentially affected product to any other organisation?

☐ No

☐ Yes, I/we will forward all the recall information to the suppliers/distributors/customers

OR

☐ Yes (please supply names and contact information of the organisations)

Complete the Customer Response Form, even if you do not have any affected stock

Submit your form via MyRener Recall Returns Upload. The Customer Service Team at Rener Health Products will respond with further instructions. All credits will be processed once returned stock has been assessed. A credit will be placed on your Rener Health Products account.