**Shopper History Success Story Submission Form**

**Submitter Information**

First Name:

Last Name:

Agency/Organization:

Email Address:

Phone Number:

**Summary (for external use and posting on the AFDO webpage:** [Leveraging Food Purchase History to Solve Foodborne Outbreaks](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.afdo.org%2Fresources%2Fpurchase-history%2F&data=04%7C01%7C%7Ca9f63bb7e4724b7d05b908d8c5f47241%7Ced5b36e701ee4ebc867ee03cfa0d4697%7C0%7C0%7C637477000980557164%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C0&sdata=B3UaKQ6yemU3HXvQZShp37p%2F%2BJSU4vyOWxEdLtyzpaQ%3D&reserved=0)**)**

Please keep the summary high level and de-identify any retailers/establishments. Highlight relevant outcomes, including:

1. Use of this data that led to solving an outbreak or other good investigation/public health outcome.
2. Strengthened industry-government collaboration.
3. Innovative mechanisms developed or used by industry or government.
4. Development of useful resources.

Template:

## ***(Insert Pathogen)* Outbreak Associated with *(Insert Product)* – *(Insert Shopper History Mechanism – Debit Card, Shopper Card, Online App, etc)***

In a (*Year*) outbreak of (*Number of cases*) *(Pathogen)* illnesses from (*Number of states*) states linked to (*product*), *(describe shopper history mechanism and how it was used to investigate the outbreak, highlighting outcome).*

**Additional Information (optional – will not be shared publicly):**

Pathogen:

Product:

Retailer (optional):

Shopper History Method:

Public Health Impact:

Number of states:

Number of cases:

Public information (links to outbreak-related web postings):