

Name : \_\_\_\_\_

Date : \_\_\_\_\_

Age (please select)

- 10 - 17 years old

- 45 - 54 years old

- 18 - 24 years old

- 55- 64 years old

- 25 -34 years old

- 65-74 years old

- 35 - 44 years old

- 75 years or older

**Have you ever had a reaction to MSG ?**

Yes  No  ( if yes then please do not complete the rest of the survey )

**Are you allergic to potatoes and / or had a reaction to potatoes?**

Yes  No  ( if yes please do not complete the rest of the survey )

**Are you comfortable with consuming MSG ?**

Yes  No  ( if no please do not complete the rest of the survey )

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For this test you will consume two samples of mash potatoes(samples A and B ) . After trying the samples please fill in the form below .

**Which sample did you prefer ? Select .**

A  B

**Why did you prefer that sample ? .**

A) Overall taste

B) Sensation in the mouth

C) Smell

D) Other : \_\_\_\_\_

**Signature :** \_\_\_\_\_