



# FOOD DONATION DELIVERY FORM



### DONOR AND RECIPIENT INFORMATION

PERISHABLE FOOD ITEM(S)	QUANTITY (LBS)	DONOR TEMP AT HOLDING	TIME TAKEN	RECIEVER TEMP AT RECEIPT	TIME TAKEN	ACCEPTED
						YES or NO
						YES or NO
						YES or NO

\*\*Flip for additional rows

### DONATED FROM:

Name of Facility or Event \_\_\_\_\_ Public Health Permit # \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_  
Delivered by (print name): \_\_\_\_\_

### TRANSPORTED BY (IF OTHER THAN DONOR OR RECIPIENT):

Name of Delivery Organization: \_\_\_\_\_ Public Health Permit # (if applicable) \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_  
Delivered by (print name): \_\_\_\_\_

### DONATED TO:

Name of Facility or Organization \_\_\_\_\_ Public Health Permit # (if applicable) \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_  
Received by (print name): \_\_\_\_\_

*I acknowledge that the food item(s) listed above meet the temperature holding requirements for potentially hazardous foods, as defined in Section 113871 of the California Retail Food Code.*

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

Recipient Signature \_\_\_\_\_ Date \_\_\_\_\_

