Food Donation Tracking Form for Food Facility Operators

to help you keep track of your facility's food donations.

Name of Facility or Event (Donor)														
Addres	ddress													
Deliver	ed By (Print Contact N	Name) (0	Organizati	on Name if differ	rent from Don	Date Delivered								
Date	Type of Food	Quantity/ Amounts	Units (lbs. Gal, Cans, etc.	DONOR Temperature at Holding Time (if perishable)	Time temp was taken (if perishable)	RECEIVER Temperature at receipt (if perishable)	Time temp was taken (if perishable)	Accepted (Yes/No)						

Date	Type of Food	Quantity/ Amounts	Units (lbs. Gal, Cans, etc.	DONOR Temperature at Holding Time (if perishable)	Time temp was taken (if perishable)	RECEIVER Temperature at receipt (if perishable)	Time temp was taken (if perishable)	Accepted (Yes/No)	
				(i pononació)					
* This po	ortion is to be complete	d by Food [Donation F	Recipients:					
Name of	Receiving Agency								
Received	By (Print Name)	Date Red	Date Received						
	ledge that the food item de (PotentiallyHazardou		ove meet	the temperature	holding requi	irements of Section '	l 13871 of the C	alifornia Retai	
Donor S	iignature:	Date:	Date:						
Recipient Signature:							Date:		