

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)

* This portion is to be completed by Food Donation Recipients:

Name of Receiving Agency

Received By (Print Name) Date Received

I acknowledge that the food item(s) listed above meet the temperature holding requirements of Section 113871 of the California Retail Food Code (Potentially Hazardous Food).

Donor Signature:	Date:
Recipient Signature:	Date: