Sarah Huckabee Sanders
Governor

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FOOD AND NUTRITION DIVISION - FOOD DISTRIBUTION UNIT

FOOD TRANSFER FORM

Transferring Agency:_____ Receiving Agency:_____

Date Transferred:_____ Date Received:_____

_____ _____

Superintendent Signature Superintendent Signature

USDA Foods Transferred

USDA Food Code/Name	Best if Use by Date:	Pack Size	Cases Transferred

Signature: _____ Signature: _____

Transferring Agency Receiving Agency

Signature: _____ Date: _____

Authorizing Agency – Food Distribution Unit

The Food Distribution Unit requires **pre-approval** to transfer USDA foods from one agency to another. A copy of the transfer must be on file by both the Transferring and Receiving Agency's files for auditing purposes.

Please scan and email the completed form to ADA Food Distribution Unit.

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