California (CA) Food Distribution Program U.S. Department of Agriculture (USDA) Foods Transfer Form

Authorization Number:

| USDA Foods Code | Food Item | Quantity | Reason | Entitlement Yes/No |
|--------------------|-----------|----------|--------|-----------------------|
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Processor Name: Signature: Email: Date:

Sending Agency

CA Excess Account Agency/Co-op: Contact Person: Email: Signature: CA Unallocated Account RA Number: Phone Number:

Date:

Receiving Agency

CA Excess Account Agency/Co-op: Contact Person: Email: Signature: CA Unallocated Account RA Number: Phone Number:

Date:

State Use Only – Nutrition Services Division

Initials:

Checked for Entitlement Approved by: Date: Date: