



## INSTRUCTIONS

**THIS FORM IS TO BE USED FOR REPORTING ALL LOSSES OF USDA DONATED FOODS, FORMS MUST BE COMPLETE. INCOMPLETE FORMS MAY RESULT IN REQUEST FOR PAYMENT**

**Complete:** Name of your facility, county, name and address of loss site, date and time of loss, and agency telephone number.

**CODE:** The code number of the USDA Donated Food lost.

**FOOD ITEM:** Name of USDA Donated Food lost.

**UNIT SIZE:** Packaging size for each unit (Example: 6/5#, 6/10#, 30#, 12/3#)

**POUNDS:** Enter number of pounds lost for this food item.

**PACKAGE DATE:** Package date stamped on case or baler by USDA.

**CONTRACT NUMBER** Four to seven digit number stamped on case or baler.

**INVOICE NUMBER and DATE:** Can be found in the upper right hand corner of invoice.

**DATE FOOD REC> AT LOSS SITE:** Date of pickup or delivery to the storage or loss site.

**REASON FOR LOSS:** Infestation, equipment malfunction, theft, etc.

### DOCUMENTATION

**DIVISION OF HEALTH DESTRUCTION REPORT:** Must be submitted on all losses except theft.

**LETTER OF CIRCUMSTANCES:** Must be submitted on ALL LOSSES giving details of loss, and planned protective measures to prevent further loss.

**REPAIR INVOICE:** Copy of repair invoice if loss is due to equipment malfunction.

**TEMPERATURE LOG:** A copy of current months up to date log and prior 3 months logs must be submitted on all losses involving freezer or cooler losses.

**POLICE REPORT:** Copy of police report if loss involves theft.

**INSECT AND RODENT CONTROL RECORDS** Copy of service call or treatment schedule invoice from the pest control company utilized by your facility if loss is due to infestation.

**SIGNATURE AND TITLE OF PERSON COMPLETING THIS FORM:**

\_\_\_\_\_ **DATE** \_\_\_\_\_

For assistance with this form, call our office at 501-371-1400 or contact your Commodity Distribution Field Representative.

Return Completed Form within 30 days of Food Loss to:

**Commodity Distribution  
P.O. Box 1437, Slot S-337  
Little Rock, AR. 72203**