

VOLUNTEERS FOOD DONATION FORM

I _____ am donating the
following food item; _____
for the following function; _____

My food may contain the following allergens;

- Nuts
- Eggs
- Gluten
- Shellfish
- Soy
- Milk
- Other (please specify) _____

This food was prepared at _____ on _____
(time) (date)

This food is/has/has not been frozen.

This food has remained under temperature controls at all times.

OR

This food has spent _____ (hours/minutes) out of temperature control (i.e. during preparation or transport).

I sign that to the best of my knowledge this food has been prepared and handled in a safe manner, for the safe consumption by the public.

(sign) (date)

CLUB/GROUP USE ONLY

This food was received at _____ on _____ and received by
_____. This food was hot/cold/frozen.