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PO Box 9825 Vancouver, WA 98666-8825 564.397.8428

Donor Food Information and Attestation Form

| Section A: Donor information | |
|--|--|
| Name of individual or organization: | |
| Phone and/or e-mail address: | |
| Signature:Date: | |
| Section B: Food preparation, transportation and quality | |
| List foods donated: | |
| List where foods were purchased or obtained: | |
| For foods that are cold or hot, what methods did you use to keep them below 41°F possession (including during storage and transportation): | , |
| If hot or cold food was not kept cold during storage or transportation, how long mig zone" (between 41°F – 135°F)? | ht it have been in the "danger |
| Note: only baked goods can be prepared in a private/residential kitchen. Prepared | foods that are required to be |
| kept cold or hot for safety cannot be made in private/residential kitchens. | Contact Clark County Public |
| Health to learn more about options you may have. | |
| Initial each item below that is true for the foods you are donating today: | |
| Cold foods have been kept at 41°F or below. | |
| Hot foods have been kept at 135°F or higher. | |
| Pre-packaged foods have not been opened or tampered with. | |
| Foods have not been previously served to another person. | |
| Foods have not been exposed to or contaminated by chemicals, unwa | shed wares, or raw proteins. |
| Foods have not been subject to fire, flood, or prolonged storage. | |
| Infant formula is not expired or recalled by the manufacturer. | |
| Foods are not home canned. | |
| Canned food containers are not rusty or severely damaged. | roo of incores dist enimals leaders |
| Foods were transported in the interior of a vehicle that is clean and f and other potential contaminants. | ee or insects, on t, animais, leakage, |

| Section C: Baked goods |
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| This section is to be filled out if you are donating baked goods that are ready to eat. Initial each item below that i s |
| true for the foods you are donating today: |
| N/A: I am not donating baked goods. |
| Baked goods donated do not have fillings or topping needing refrigeration. |
| Baked goods donated were purchased from a permitted store or food establishment. |
| Baked goods were handled, stored, and prepared in a private/residential kitchen. |
| Section D: Wild game muscle meat This section is to be filled out only if you are donating muscle meat of wild game. Initial each item below that is true for the foods you are donating today: |
| N/A: I am not donating wild game muscle meat |
| Muscle meat has been properly handled, stored, and processed in an approved donor kitchen |
| I am a law enforcement officer that is certified by a jurisdiction within WA State |
| I am a hunter licensed by the WA State Department of Fish and Wildlife |
| I am a licensed and approved meat cutter |
| I am a member of an approved youth club (such as 4H or FFA) |
| The following wild game muscle meat is being donated today. Initial each item below that you are donating |
| today: |
| domesticated livestock |

___ poultry __ rabbit