

**FOOD DISTRIBUTION PROGRAM
DISPOSAL OF FEDERALLY DONATED FOODS**

FORM FDP-101 Rev. 5/2016

Name and Address of Recipient					Date	
Approval for disposal of Foods Listed Below:						
Food Type /Item No.	Amount	Manuf. Lot Number	Packing Date	Date received	CNP Invoice No.	Value
<i>Example: Peaches 100219</i>	<i>1 – 30# Case</i>	<i>35262016-0716</i>	<i>04-01-2014</i>	<i>01-09-2015</i>	<i>14816</i>	<i>\$30.61</i>
Reason for Disposal						
Instruction for Disposal:						
Either put in disposal, or Empty container and place in separate bags with either bleach or ammonia.						
Authorized Recipient Agency Representative Signature					Date	
Witness for Recipient Agency Signature					Date	
Food Distribution Program Representative Signature					Date	

PLEASE keep ONE COPY with your records. RETURN ONE COPY TO: FOOD DISTRIBUTION PROGRAM, P.O. BOX 95026 LINCOLN, NE 68509-5026
Claim Reimbursement Information Must Be Complete