

## USDA Foods Transfer Request

<b>State-to-State</b>	Releasing State: _____	Receiving State: _____	Processor: _____
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-OR-

<b>Processor-to-Processor</b>	Physical [ <input type="checkbox"/> ] Paper [ <input type="checkbox"/> ] Authorization Number (State Use) : _____	State Signature: _____
Releasing Processor: _____	Receiving Processor: _____	
Recipient Agency: _____	RA Number: _____	Contact Name: _____ RA Signature: _____

Sales Order Number	SO Item Number	Material Code	Material Description	Quantity (Cases/Lbs)	SDA (Sold-To Party BP)	Entitlement Adjustment	
						YES	NO
For Paper Transfers:	\$ value and check amount						

**RELEASING STATE OR PROCESSOR**

Releasing State Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

Processor Signature *(if applicable)* \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

**RECEIVING STATE OR PROCESSOR**

Receiving State Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

Processor Signature *(if different from above)* \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

**FNS USE ONLY**

USDA/FNS Specialist: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

