

This form must be sent to FBA whenever you receive a new shipment of meals



## Child and Adult Care Food Program FY2020 Shipping & Receiving Log

Site Name \_\_\_\_\_

| Date Received | # of Cases Received | Date Contacted FBA |
|---------------|---------------------|--------------------|
| _____         | _____               | _____              |
| _____         | _____               | _____              |
| _____         | _____               | _____              |
| _____         | _____               | _____              |
| _____         | _____               | _____              |

Comments/Explanations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

Please return to: Food Bank of Alaska  
Fax 1-907-277-7368  
[cdonohue@foodbankofalaska.org](mailto:cdonohue@foodbankofalaska.org)