

USDA Foods Transfer Request

State-to-State	Releasing State: _____	Receiving State: _____	Processor: _____
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-OR-

Processor-to-Processor	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: _____

