Akron-Canton Regional Foodbank

Sub-Distribution Log

Partner Name & Account Number: _____

Prior to sub-distribution, both partners must sign the Foodbank's Sub-Distribution Agreement. Please keep sub-distribution log for 5 years.

Transfer Date	Item	Quantity	Received from/Distributed to (Partner Name)	If TCS: Temp. Prior to Delivery	If TCS: Temp. After Delivery