PORK POWER! Partnering to Fight Hunger in Illinois

Donation Reporting Form











Producer/Donor Information Date of Delivery Farm Name Contact Person City_____ State____ Zip___ Email ____ Phone _____ Signature Total # swine donated _____ Estimated or Actual Total Live Weight Meat Processor Use Only Processing Plant Contact Person & City: Authorized Signature Date_____ Donated Hogs Information (completed by Meat Processor) Trim Weight _____ # Market Hogs____ Carcass Weight_____ # Sows Trim Weight Carcass Weight Total Carcass Weight of Donated Swine _____ X \$.65/ lb. = ____ (amt. due to processor) Total Amount of Donated Pork Fax or mail copy to: Contact your nearest IPPA - 6411 S. 6th St. Rd.- Springfield, IL 62712 regional food bank to (217) 529-1771 – fax OR email - delma@ilpork.com arrange pick up. (must submit form to IPPA within 2 weeks of processing donated pork) Food Bank Agency Use Only Name of Food Bank Contact Person

Thank you for your recent donation. It will be distributed to charitable organizations that feed needy people in our area. As a 501(c)(3) organization, your donation will be used in compliance with clauses (i) and (ii) of Section (170)(e)(3) of the Tax Reform Act of 1976, and our records are available to the IRS upon request. We affirm that no goods or services were provided to you by us in exchanged for this donation.

Authorized Signature