

## Partnering to Fight Hunger in Illinois

Contact IPPA office prior to processing to ensure funds are available.

| DONOR INFORMATION                                  |                      |                        |   |
|--|----------------------|------------------------|---|
| Date of Delivery                                   | Farm Name _          |                        |   |
| Contact Person                                     |                      |                        |   |
| Address  |                      |                        |   |
| City/State/Zip                                     |                      |                        |   |
| Phone  | Email                |                        |   |
| Total # swine donated                              | Estimated or ac      | tual total live weight |   |
| Signature  |                      |                        |   |
| MEAT PROCESSOR USE ONLY                            |                      |                        |   |
| Processing Plant                                   |                      |                        |   |
| Contact Person & City                              |                      |                        |   |
| Authorized signature                               |                      | Dat                    | e |
| Donated Hogs Information (comp                     | oleted by Processor) |                        |   |
| # Market Hogs                                      | Carcass Weight       | Trim Weight            |   |
| # Sows   | Carcass Weight       | Trim Weight            |   |
| Total Carcass Weight of Donated Swine X \$.65/lb = |                      |                        |   |
| Total Amount of Donated Pork _                     |                      |                        |   |
| FOODBANK INFORMATION                               |                      |                        |   |
| Name of Foodbank                                   |                      |                        |   |
| Contact Person                                     | Phone Number         | Email                  |   |





RETURN COMPLETED FORM TO CASEY@ILPORK.COM

**Pork Power Program Year 2021**