

**CITY OF WOODLAND
EDIBLE FOOD RECOVERY LOG**

*Due on the 15th of each month following the collection of Edible Food
submitted by the FRO/FRS to the City of Woodland and CEFG*

Month: _____ Year: _____

Pickup Location/Address: _____

Delivery Location/Address: _____

Recovery Log:

Week #	Dates of Food Pickups/Deliveries	Total Pounds of Food Collected
1		
2		
3		
4		
5		
Total		

Rejection Log:

Date	Reason/Description

Estimated number of people served (optional): _____

I, _____ (print name), attest that the food collected above was distributed under the terms and conditions set in this agreement, preventing it from entering the landfill waste stream, helping reduce organic waste disposal, while also rescuing food for people to eat.

FRO/FRS Signature: _____

Phone Number/Email: _____