



RECEIVING CHECKLIST

DO/PO: _____

DATE: / /

COMPLETED



CLERK/MANAGER INITIALS

RECEIVING OFFICE — ARRIVAL PHASE

| | | | |
|-------------------------|---|------------------------|------------------------------|
| DRIVER NAME: | | DRIVER PHONE: | |
| CHECK-IN TIME: | | APPOINTMENT TIME: | |
| BOL RECEIVED: | <input type="checkbox"/> YES | PO/DO CONFIRMED CERES: | <input type="checkbox"/> YES |
| PRODUCT STORAGE NEEDED: | <input type="checkbox"/> DRY <input type="checkbox"/> REF <input type="checkbox"/> FRZ <input type="checkbox"/> PRODUCE | | |
| DOOR ASSIGNED: | | DOOR ASSIGNED TIME: | |

WAREHOUSE — UNLOADING PHASE

| | | | |
|--|--|-------------------------|--|
| RECEIVER ASSIGNED: | | RECEIVER ASSIGNED TIME: | |
| VEHICLE INSPECTION: | <input type="checkbox"/> YES - ADD TO PACKET | PRODUCT INSPECTION: | <input type="checkbox"/> GOOD <input type="checkbox"/> ISSUE |
| IF PRODUCT IS DAMAGED, SPOILED OR OTHER ISSUE WITH LOAD, CONTACT MANAGER | | | |
| MANAGER INFORMED: | | INFORMED MANAGER TIME: | |
| PRODUCT UNLOADED AREA: | | UNLOAD COMPLETION TIME: | |

PRODUCT INFORMATION — IF MORE THAN ONE ITEM OR LOT, USE "RECEIPT LOG"

| | | | |
|-------------------------|--|--------------------------|--|
| DESCRIPTION: | | PACK SIZE: | |
| UNIT OF MEASURE: | <input type="checkbox"/> EA <input type="checkbox"/> CS <input type="checkbox"/> LBS <input type="checkbox"/> PALLET | UNITS ON PALLET: | |
| PALLET TIER: | | PALLET HEIGHT: | |
| NUMBER OF FULL PALLETS: | | CASES ON PARTIAL PALLET: | |
| DATE TYPE: | | DATE ON PACKAGE: | / /20 <input type="checkbox"/> UPDATED |

DATE TYPES: BEST BY, USE BY, SELL BY, FREEZE BY, PACKAGED ON, MANUFACTURED ON

RECEIVING OFFICE — RECEIPTING PHASE

| | | | |
|--------------------------|---|---------------------------|--|
| TYPE OF LOAD: | <input type="checkbox"/> USDA <input type="checkbox"/> CSFP <input type="checkbox"/> PUR <input type="checkbox"/> DON | COLLABORATIVE PRODUCE: | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| IF USDA OR CSFP, 5000 #: | | IF CFP, PR NUMBER: | |
| VERIFY UNIT OF MEASURE: | <small>CSFP=EA USDA=CS</small> | VERIFY ITEM: | <input type="checkbox"/> YES |
| NEW ITEM CARD NEEDED: | <input type="checkbox"/> YES <input type="checkbox"/> NO | DATE ITEM CARD REQUESTED: | |

NOTES: CSFP=EA/USDA=CS / PO—SHOULD ONLY HAVE PURCHASED ITEMS / DO-USED FOR DONATED, USDA & CSFP / FULL TRUCK @ 40K LBS

| | | | |
|---|---|--------------------------|---|
| RECEIPT IN CERES: | <input type="checkbox"/> YES | PALLET TAGS PRINTED: | <input type="checkbox"/> YES |
| PALLET TAG START NUMBER: | P000 | PALLET TAG END NUMBER: | P000 |
| PUT-AWAY ASSIGNED TO: | | PUT-AWAY ASSIGNED TIME: | |
| VERIFY PUT-AWAY IN CERES: | <input type="checkbox"/> YES | PUT-AWAY COMPLETED TIME: | |
| IF USDA, RECEIPT IN TX-UNPS: | <input type="checkbox"/> YES <input type="checkbox"/> N/A | IF CFP, RECEIPT ON WEB: | <input type="checkbox"/> YES <input type="checkbox"/> N/A |
| PACKET SCANNED TO SHAREPOINT (CERES RECEIPT, CHECKLIST, VEHICLE INSPECTION, BOL): | | | <input type="checkbox"/> YES |
| TURN PACKET IN TO RECEIVING CLERK OR MANAGER: | | | <input type="checkbox"/> YES |

RECEIVING CLERK OR MANAGER — VERIFICATION PHASE

| | |
|---|------------------------------|
| ALL ABOVE TASKS COMPLETED AND VERIFIED: | <input type="checkbox"/> YES |
|---|------------------------------|



RECEIPT LOG

DO/PO: _____

DATE: / /

COMPLETED



CLERK/MANAGER INITIALS

WAREHOUSE — UNLOADING PHASE

PRODUCT INFORMATION — IF MORE THAN ONE ITEM OR LOT, USE ANOTHER "RECEIPT LOG"

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| PALLET TIER: | | PALLET HEIGHT: | |
| NUMBER OF FULL PALLETS: | | CASES ON PARTIAL PALLET: | |
| DATE TYPE: | | DATE ON PACKAGE: | |

DATE TYPES: BEST BY, USE BY, SELL BY, FREEZE BY, PACKAGED ON, MANUFACTURED ON

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RECEIVING ASSOCIATE INFORMATION

ASSOCIATE NAME:

ASSOCIATE SIGNATURE:



VEHICLE / PRODUCT INSPECTION

DATE: _____
 TIME IN: _____
 LOCATION: () PFC () OTHER

NTFB INSPECTOR: _____
 CARRIER: _____
 PO / DO: _____

BEFORE TRUCK IS AT DOCK DOOR

RECEIVER SHOULD BE OUTSIDE WITH DRIVER TO VERIFY STEPS BELOW ARE COMPLETE

OUTSIDE OF TRAILER: () CLEAN () DIRTY NOTE:

TRAILER SEAL: () INTACT () BROKEN () NOT PRESENT SEAL #:

HAVE DRIVER OPEN TRAILER DOOR(S)

SMELL: () CLEAN () SOUR () MOLDY NOTE:

AFTER TRUCK HAS ARRIVED AT DOCK DOOR (PRE-UNLOAD)

RECEIVER SHOULD BE OUTSIDE TO VERIFY STEP BELOW IS COMPLETE

WHEELS CHOCKED: () YES — CONTACT SUPERVISOR IF UNABLE TO CHOCK WHEELS

RECEIVER SHOULD BE INSIDE TO VERIFY BELOW STEPS ARE COMPLETE

INDICATED TEMPERATURE: _____ RECORDER: () YES () NO

TEMPERATURE IN COMPLIANCE AS NECESSARY FOR PRODUCT: _____ () YES () NO

TYPE OF PRODUCT: _____ QTY: _____

HOW IS PRODUCT STORED IN TRUCK: () PROPERLY STACKED () IMPROPERLY STACKED
 () CRUSHED/BROKEN () SLIP SHEET () SCATTERED/LOOSE

NOTE:

EVIDENCE OF ACTIVITY: () INSECTS () RODENTS/DROPPINGS/URINE () BIRDS

NOTE:

CONDITION OF INSIDE TRAILER: () CLEAN () DIRTY NOTE:

NOTIFY SUPERVISOR IMMEDIATELY IF THERE ARE ANY ISSUES NOTED ABOVE

AFTER TRUCK HAS ARRIVED AT DOCK DOOR (POST-UNLOAD)

SAMPLING / EXAMINATION OF SHIPMENT

NUMBER OF BAGS/BOXES/CASES/CARTONS/CONTAINERS IN SHIPMENT: _____

NUMBER OF BAGS/BOXES/CASES/CARTONS/CONTAINERS OPENED: _____

NUMBER OF ITEMS TAKEN FROM BAGS/BOXES/CASES/CARTONS/CONTAINERS THAT WERE EXAMINED: _____

NUMBER OF ITEMS FOUND CONTAMINATED: _____

EVIDENCE OF ACTIVITY: () INSECTS () RODENTS/DROPPINGS/URINE () BIRDS

NOTE:

RECOMMENDATION TO ACCEPT: () YES () NO — INFORM SUPERVISOR IMMEDIATELY

SIGNATURE OF NTFB INSPECTOR: _____

TRUCK TIME OUT: _____