



**Form:**

Dairy Donation and Distribution Plan Form

Version: 20210513

#VAI

AMS-Dairy Program

Owner: Management

/s/ Erin Taylor

[UE!

Replaces: N/A

Approved by: Managing Author  
/s/ Patrick S. Clark



Consolidated  
Appropriations Act  
of 2021.pdf

**No. Instructions for the Dairy Donation and Distribution Plan Form**

1 It is important that this Workbook is not altered and that each record is completed fully in the [EligibleEntities] tab so that the approval process and reimbursements are not delayed.

2 Complete a record for each Processor and Eligible Distributor Location. Complete all fields to avoid delays.

3 The Eligible Distributor Certification Form shall be provided to each eligible distributor partner for them to certify their eligibility and their partnership with the eligible dairy organization (EDO) identified on this [Certification] tab. Each eligible distributor location that will receive and distribute donated eligible dairy product from the EDO must be included on this plan.

4 After completing records as described above, you must complete the [Certification] tab prior to submitting this form for approval. If all of the required Certification fields are not fully completed, the partnership will not be approved.

5 After this form is submitted to and approved by AMS, you will receive by email a Dairy Donation and Distribution Plan Approval and a password to be used in conjunction with future Reimbursement Claim Forms, which can be downloaded from the Dairy Donation Program website. Reimbursement Claim Forms with the assigned password must be used by the EDO identified in this plan. If your Dairy Donation and Distribution Plan needs updating, you must submit a new plan and then will receive a new Dairy Donation and Distribution Plan Approval and password.

6 Insert copy of W-9 form in the W-9 tab of Company entered in the Certification tab. This can be accomplished in a number of ways. The preferred method is to insert as PDF. Simply select: Insert, Object, Create from File, Browse, Select the PDF File of W-9 Form, Insert, OK. This is required to set up an account within USDA's financial system to facilitate direct deposit of reimbursement claims.

7 Under these donation programs (Milk Donation Reimbursement Program and Dairy Donation Program), eligible dairy organizations that incur qualified expenses related to certain dairy product donations may apply for and receive specified reimbursements to help cover expenses. This program is intended to encourage the donation of dairy products to recipient individuals and families while reducing food waste.

8 After completing this form as instructed, go to the [Certification] tab to certify the information provided in your Dairy Donation and Distribution Plan by typing your name. Please send the certification of all eligible distributor partners along with this plan.

Eligibility and Definitions:

9 1. To qualify as an eligible dairy organization, you must be a dairy farmer cooperative or a dairy processor that: (1) accounts to a Federal Milk Marketing Order; and (2) incurs a qualified expense described in 7 CFR § 1147.1.  
2. To qualify as an eligible distributor, the distributor must be a public or private non-profit feeding organization distributing or coordinating distribution of donated eligible dairy products to recipient individuals and families.

Entity type refers to:

1. Processor (purchasing fresh fluid product -- raw milk, skim milk, cream, or concentrated fluid milk products -- for processing into an eligible dairy product or purchasing bulk dairy commodity product for further processing into an eligible dairy product); or  
2. Eligible distributor.

10 Under these donation programs (Milk Donation Reimbursement Program and Dairy Donation Program), eligible dairy organizations that incur qualified expenses related to certain dairy product donations may apply for and receive specified reimbursements to help cover expenses. This program is intended to encourage the donation of dairy products to recipient individuals and families while reducing food waste.

11 For More Information:  
Click icon(s) located in Row 1 of this tab (starting in Column E)  
Website: [www.ams.usda.gov/ddp](http://www.ams.usda.gov/ddp)  
Email: [ddp@usda.gov](mailto:ddp@usda.gov)

Entity\_Name

Entity\_Contact\_Name

Entity\_Contact\_Title

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Entity\_Contact\_Email

Entity\_Physical\_Address

Entity\_Physical\_City

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Entity\_Physical\_State    Entity\_Physical\_Zip    Entity\_Physical\_County    Entity\_Type

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Line

**Line 1**

**Insert Below Copy of W-9 Form (Company Name in Certification tab MUST match what is on the W-9 form.)**

*Simply select: Insert, Object, Create from File, Browse, Select the PDF File of W-9 Form, Insert, OK.*



Signed

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Date

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Title

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Phone

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Extension

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Fax

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Bank

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Account

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Routing

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TaxID

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Email

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Company

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Address1

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Address2

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City

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State

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Zip

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Description

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Submission

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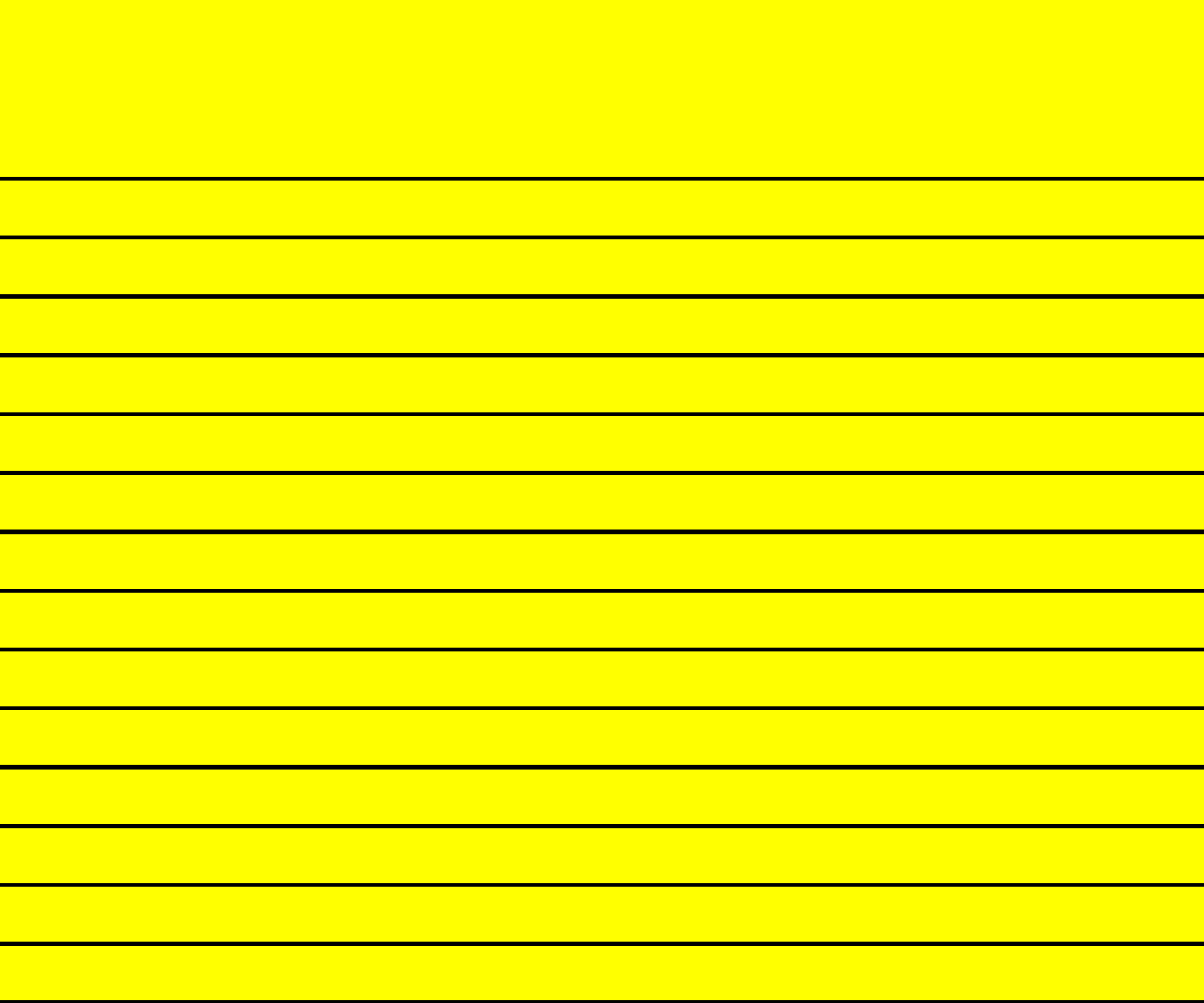
# **Donation and Distribution Plan Certification, Payment Information, and Banking Information**

This is a partnership donation and distribution plan approval request.

Please review pertinent donation programs' regulations to ensure eligibility.

By typing your name below, you are certifying that your products meet the requirements laid out in the pertinent donation programs' regulations and that you have obtained Certifications from the Eligible Distributor Partners.

You must type name in signed box, enter all contact information, company name, and all address information in yellow shaded area below of entity receiving reimbursements (Address Line 2 and Extension may be omitted, if not needed).

A large yellow shaded area with horizontal black lines, intended for entering contact and address information. The area is rectangular and occupies the lower half of the page. It consists of a solid yellow background with approximately 15 horizontal black lines spaced evenly down its length.



After completing this form and certifying, email this and the Certifications from the Eligible Distributor Partners to Dairy Program for approval.

**USDA will only approve future reimbursement claims of those entities (Plants and Donation Distributors) that are included in this plan submitted for approval.**



<Not a Required Field.

<Not a Required Field.

<Not a Required Field.

<For Internal Use Only.