



**AUTHORIZED SHOPPER FORM**

**AGENCY NAME:** \_\_\_\_\_

*Authorized Agency Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

Please indicate up to four (4) people who will be authorized by your agency to procure food at SHFB. You **must** attach a photo copy of a California Driver's License or California Identification card for **each** authorized shopper.

*To prevent warehouse congestion, your agency may only have 2 shoppers on the warehouse floor at a time.*

1.) Name: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Email: \_\_\_\_\_

*California Driver's License/ I.D. attached*

2.) Name: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Email: \_\_\_\_\_

*California Driver's License/ I.D. attached*

**ALTERNATE:**

3.) Name: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Email: \_\_\_\_\_

*California Driver's License/ I.D. attached*

4.) Name: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Email: \_\_\_\_\_

*California Driver's License/ I.D. attached*

***EACH SHOPPER MUST BE PROVIDED WITH A COPY OF THE WAREHOUSE RULES***

The Warehouse Rules are available for download on our website

**[www.localfoodbank.org](http://www.localfoodbank.org)**

**\*\*\* Please Note:** Future changes to the list of authorized shoppers **must** be addressed in writing, on agency letterhead, dated and signed by the agency's primary contact. If a new shopper is added, the notification must be accompanied by a copy of their California Driver's License or California Identification card.

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