UNITED STATES DEPARTMENT OF AGRICULTURE FOOD AND NUTRITION SERVICE *FOOD REQUISITION* SEE INSTRUCTIONS ON REVERSE	STATE	NAME OF DISTRIBUTING AGENCY	CHECK ONE ("X") ☐ UNITS ☐ POUNDS	TYPE OF ACTION ☐ ADD ☐ CHANGE ☐ CANCEL	

1. COMMODITY (SHORT TITLE) (20)	2. D/A CODE (3)	3. DELIVERY YEAR (ALPHA) (1)	4. FISCAL YEAR OF PURCHASE (2)	5. SECTION OF PUBLIC LAW (3)	FOR FNS USE ONLY	
					6. REQUISITION NO. (3)	7. STAMP DATE (6)

8. DELIVERY ORDER NO. (4)	9. ALLOCA-TION (5)	10. ENDING SHIPPING/ DELIVERY DATE (6)	11. PLANNED PROGRAM USAGE BY OUTLET, ADJ CODE & QUANTITY FIRST LINE: SHOWS OUTLET(S) (4) AND ADJUSTMENT CODE(S) (1) SECOND LINE: SHOWS QUANTITY FOR EACH OUTLET (7)				12. TOTAL QUANTITY (8)	13. REDO CODE (1)	14. DESTINATION		
			OUTLET 1	OUTLET 2	OUTLET 3	OUTLET 4			ENTITY CODE (5)	C/D (1)	CITY (16)

The undersigned, being duly authorized to request foods for and on behalf of the agency named above, does hereby certify that local preferences and inventories have been considered prior to submitting this food request, agrees to accept the food shown hereon upon delivery at destination(s) indicated, and to distribute the entire quantity in accordance with instructions of the Food and Nutrition Service. The signing of the "Distributing Agency Consignee Receipt" on Form KC-269A by the undersigned or his designee shall constitute acceptance of the food for and on behalf of the Agency.

15. DISTRIBUTING AGENCY CERTIFICATION			16. FOOD AND NUTRITION SERVICE APPROVAL		
A. DATE	B. SIGNATURE	C. TITLE	A. DATE	B. SIGNATURE	C. TITLE

FORM FNS-52 (9/98) Previous editions obsolete

SBU

ITEMS

STATE - Enter the name of the State in which the Distributing Agency is located.

DISTRIBUTING AGENCY - Enter the name of the Distributing Agency

UNITS OR POUNDS - Place an "X" in the applicable box.

TYPE OF ACTION - Place an "X" in the applicable box.

The numbered blocks will be keyed by FNS Regional Office, as outlined below. The numbers appearing in parentheses after the block title show the maximum number of characters that may be keyed.

BLOCK

1. *COMMODITY - Enter the short title as provided by the FNS Regional Office. (This must be identical to the short title given in the FNS commodity file.)*

2. *D/A/ CODE - Enter the three digit code number of the Distributing Agency.*

3. *DELIVERY YEAR - Enter the alphabetical designation, provided by FNS Regional Office, for delivery year in which shipment is to be made, regardless of outlet. For example, all orders requested for shipment between 7/1/82 and 6/30/83 should have a delivery year code D, for all outlets.*

4. *FISCAL YEAR OF PURCHASE - Enter the fiscal year during which the commodity will be purchased. This information is provided in allocations for Group A foods and for Group B foods through a separate coding sheet available from FNS.*

5. *SECTION OF PUBLIC LAW - Enter the section of the public law as advised by the FNS Regional Office.*

6. *REQUISITION NUMBER - Leave blank. This space for FNS use only.*

7. *STAMP DATE - Leave blank. This space for FNS use only.*

8. *DELIVERY YEAR - Order number assigned by the Distributing Agency should be expressed in three digits, beginning with 001 for each food unless instructed differently by FNS Regional Office. If a destination change is necessary to the original order, the original order must be cancelled and the changed order would carry the original order number plus an alphabetical suffix, A, B, or C. suffixes D, E, etc. are used for other types of delivery order changes, such as when it is necessary to split one delivery order into two or more. If it is necessary to cancel an order for any reason other than a destination change after it has been processed by the Kansas City FSA Commodity Office (KCCO), the order number shall not be reused; if replacement is necessary, use a new order number.*

9. *ALLOCATION NUMBER - Enter the allocation number provided by the FNS Regional Office.*

10. *ENDING SHIPPING/DELIVERY DATE - The final day of the shipping/delivery period is required. States may show entire requested shipping/delivery period if desired.*

11. *PLANNED PROGRAM USAGE BY OUTLET, ADJUSTMENT CODE AND QUANTITIY - Enter approved codes for planned program usage as provided by FNS Regional Office. Enter the number of Units or Pounds requested for each outlet. The total of the outlet quantities must equal the quantity shown in the TOTAL QUANTITY column (Block 12). Each planned usage outlet may have one approved adjustment code, if needed.*

12. *TOTAL QUANTITY - Total quantitiy must equal the sum of the quantities shown in the Quantity columns in Block 11.*

13. *REDONATION CODE - If commodity is to be redonated at USDA expense, as approved by the FNS Regional Office, enter "R", if redonation is for information only, enter "S".*

14. *DESTINATION - (Entity Code, Check Digit Code and City). Entity and check digit codes provided by KCFO for each given destination must be used. If the city name is less than 7 digits, the State 2-letter code must also be shown. If it is necessary to change the destination for an order already submitted to KCFO, please follow the instructions for Block 8, Delivery Order Number.*

REMARKS - For use by the Distributing Agency or the FNS Regional Office. remarks will be key entered at the FNS Regional Office using established codes for standard remarks, combined code and message, or free from message. Remarks should be written or typed on the form on the appropriate order number line. Established remarks codes are available through FNS Regional Office.

DISTRIBUTION

1. *The Distributing Agency shall retain the pink copy and forward the original and other copies (with carbon inserts) to the FNS Regional Office. If any remarks are given, the last remarks page may also be kept by the Distributing Agency as a record.*

2 *After approval by the FNS Regional Office, a buff copy shall be returned to the Distributing Agency.*