



Wyoming Hunger Initiative Memorandum of Understanding Meat Processing Program Partner

Processing Facility: _____

Mailing Address: _____

Contact Person (name, phone, e-mail): _____

For participation in Wyoming Hunger Initiative's *Food from the Field*, certified processors agree to:

1. Process donated game animals into 1 or 2 lbs finished packages of grind.
2. Only process deer, elk, antelope, moose, and wild bison donated through Wyoming Hunger Initiative by individuals. No road killed or game animals obtained in any other manner shall be processed using these funds.
3. Contact Wyoming Food Bank of the Rockies when game meat is ready for distribution.
4. Take and submit CWD samples for deer, elk, and moose to the Game and Fish Wildlife Health Lab if no sample has already been submitted.
5. Require all hunters to fill out and sign the Hunter Log Sheet.
6. Require signature of local donation recipient(s) on all invoices for wild game processed through Wyoming Hunger Initiative.
7. Retain a copy for animals donated for processing through Wyoming Hunger Initiative and give carcass coupons (or copy) to local donation recipients when meat is picked up.
8. Include signed invoices and Hunter Log Sheets when submitting to Wyoming Hunger Initiative reimbursement. Wyoming Hunger Initiative will not reimburse until copies of the Hunter Log Sheet and verification of receipt from local donation recipient(s) are received with the invoice submitted to Wyoming Hunger Initiative for payment.

9. Receive reimbursement from Wyoming Hunger Initiative up to \$2.00 per pound for finished product. No reimbursement for skinning and disposal shall be accepted or reimbursed unless the carcass is disposed of due to a positive CWD test. Carcass disposal will be reimbursed if a copy of the CWD positive lab report is included with the invoice along with a receipt for the disposal.
10. Wyoming Hunger Initiative will not reimburse for processing fees above the authorized allotment, without prior approval.
11. Submit all Wyoming Hunger Initiative reimbursement invoices by the end of the season.
12. Be listed on Wyoming Hunger Initiative's website as a program partner and designed drop-off location for game animal donations.

I understand the requirements presented above and agree to abide by them.

Name of Processing Facility: _____

Signature of Owner/Proprietor: _____

Print Name of Owner/Proprietor: _____

Date: _____