



South Carolina
DEPARTMENT OF AGRICULTURE

Hugh E. Weathers, Commissioner

LOCAL FOOD PURCHASE ASSISTANCE PARTNER DISTRIBUTOR REGISTRATION FORM

The Local Food Purchase Assistance program is a cooperative agreement between the U.S. Department of Agriculture’s (USDA) Agricultural Marketing Service and the South Carolina Department of Agriculture (SCDA). SCDA was awarded \$4.7 million to allow aggregators to purchase food from local, socially disadvantaged producers. Aggregators will donate the food they purchase to “partner distributors”. These distributors may include nonprofit organizations, schools, or other groups engaged in food distribution. These distributors will then distribute the food, free of charge, to underserved communities.

The term “underserved communities” refers to populations sharing a particular characteristic, as well as geographic communities, that have been systematically denied a full opportunity to participate in aspects of economic, social, and civic life, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of

color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.

Please complete this form if you are a South Carolina nonprofit organization, school, or other group engaged in food distribution and you are interested in participating in the Local Food Purchase Assistance Program. Your information will be used to build a database for outreach and to connect you with participating aggregators. Please note that this is not a commitment and donation arrangements will be negotiated directly between partner distributors and aggregators. Information provided to the South Carolina Department of Agriculture by submission of this Partner Distributor Registration Form is public information and subject to disclosure under the South Carolina Freedom of Information Act.

Organization Name _____

Point of Contact Name _____

Organization Physical Address _____

City _____ State _____ ZIP _____ County _____

Email _____ Phone _____ Website _____

Please briefly describe the nature of your operation.

List all underserved communities (as the term is defined above) where you intend to distribute LFPA donated food. Please be as specific as possible when listing any counties, towns and even addresses of physical locations where you intend to distribute.

Please briefly describe why each location listed above meets the definition of underserved community. For example, is the location a rural community? Is the community impacted by persistent poverty or inequality? Does the location have a population that is predominately Black, Latino, Indigenous and Native American persons, Asian Americans and Pacific Islanders, or other persons of color?

What aggregators do you plan to work with, and how will you ensure that the products they deliver meet your needs in terms of product mix, delivery schedule, volume, community impact, etc.?

Signature _____ Printed Name _____ Date _____

You may print and sign on the signature line or you may provide a typed s-signature in the following format: /s/ John Doe

RETURN FORM

SC Department of Agriculture
Attn: LFPA
PO Box 11280
Columbia, SC 29211

**Save this form to your computer first before filling in and submitting electronically.
Do not submit from an internet browser.**

lfpa@scda.sc.gov