

Name of Event Leader: _____

City: _____

Brand Audit Data Card

#breakfreefromplastic

Organization: _____

Province/State/Region: _____

Type of Audit: Indoor

Audit or Outdoor Audit INDOOR: Home School Office

Email: _____

Country: _____

(check one)

Have you participated in a BFFP online training? YES NO (check one)

Start Date of Audit: (day/month/year) _____

Average amount of time spent cleaning/auditing per day (hours): _____

OUTDOOR: Coast/Shoreline Ocean

River Lake

City Park Land

Number of Volunteers*: _____

End Date of Audit: (day/month/year) _____

*To receive a certificate of appreciation for your volunteers, please email your attendance list to brandaudit@breakfreefromplastic.org

Brand Name <i>(enter 'Unknown' if not clearly marked)</i>	Item Description	Type of Product* <i>(circle one)</i>	Type of Material† <i>(circle one)</i>	Layers^ <i>(circle one)</i>	Count <i>(e.g. IIII)</i>	Total
		FP PC HP SM FG PM O	PET HDPE PVC LDPE PP PS O	ML SL Unsure		
		FP PC HP SM FG PM O	PET HDPE PVC LDPE PP PS O	ML SL Unsure		
		FP PC HP SM FG PM O	PET HDPE PVC LDPE PP PS O	ML SL Unsure		
		FP PC HP SM FG PM O	PET HDPE PVC LDPE PP PS O	ML SL Unsure		
		FP PC HP SM FG PM O	PET HDPE PVC LDPE PP PS O	ML SL Unsure		
		FP PC HP SM FG PM O	PET HDPE PVC LDPE PP PS O	ML SL Unsure		
		FP PC HP SM FG PM O	PET HDPE PVC LDPE PP PS O	ML SL Unsure		
		FP PC HP SM FG PM O	PET HDPE PVC LDPE PP PS O	ML SL Unsure		
		FP PC HP SM FG PM O	PET HDPE PVC LDPE PP PS O	ML SL Unsure		

*TYPE OF PRODUCT *(Circle one in the column above)*

FP	Food Packaging: e.g. bottles, cutlery, foam, tubs, wrappers, chip bags, cups, straws	SM	Smoking Materials: e.g. cigarette butts, lighters, cigar tips, tobacco packaging
PC	Personal Care: e.g. soap, shampoo, medical, diapers, makeup, dental, sanitary napkins	FG	Fishing Gear: e.g. nets, bait, lures, hooks, buoys, floats, rope, fishing lines, traps
HP	Household Products: e.g. cleansers, shoes, textiles, bags, toys, crates, tarps, pens	PM	Packing Materials: e.g. boxes, Styrofoam (non-food), film, bubble wrap, delivery envelopes, tape
O	Other: e.g. pellets, balloons, fragments & pieces, other plastic items		

†TYPE OF MATERIAL *(Circle one in the column above)*

PET	#1 plastic: e.g. clear or tinted drink bottles, cups, or containers	LDPE	#4 plastic: e.g. trays, film, six-pack rings, snap-on lids
HDPE	#2 plastic: e.g. hard & opaque bottles, milk jugs, polythene bags	PP	#5 plastic (polypropylene): e.g. food tubs, bottle caps & hinged lids, pill bottles
PVC	#3 plastic: e.g. pipes, shower curtains, toys	PS	#6 plastic (polystyrene): e.g. foam or hard plastic food containers, cups, lids
O	Other / Unknown: e.g. #7 plastic, unknown or unidentifiable plastics		

^LAYERS *(Circle one in the column above)*

SL	single layer, e.g. clear flexible plastic film, wrappers, polythene bags
ML	multi-layer, e.g. composites, laminates, sachets, packets, "Tetra Pak"

Submit your final data at: www.breakfreefromplastic.org/brandaudittoolkit

