

REPORT OF COMMODITIES FOR MONTH OF _____, 2011

AGENCY NAME _____ AGENCY # _____ PHONE # _____ FAX # _____

ADDRESS _____

NAME AND TITLE OF PERSON COMPLETING THIS FORM _____

REPORT DUE BY THE 15TH OF THE NEXT MONTH *Reporting period runs from the 1st day of the month to the last day of the month.

*Fill in the invoice number and date in the grid below. Report the item/amount received in **CASES**.

Week 1		Week 2		Week 3		Week 4		Week 5	
Invoice #	Date Received	Invoice #	Date Received	Invoice #	Date Received	Invoice #	Date Received	Invoice #	Date Received
Commodity	Amt/Check (✓) Item Received	Commodity	Amt/Check (✓) Item Received	Commodity	Amt/Check (✓) Item Received	Commodity	Amt/Check (✓) Item Received	Commodity	Amt/Check (✓) Item Received
Beef Stew 24/24 oz									
Cereal, Corn Flakes 12/18 oz		Cereal, Corn Flakes 12/18 oz		Cereal, Corn Flakes 12/18 oz		Cereal, Corn Flakes 12/18 oz		Cereal, Corn Flakes 12/18 oz	
Chicken, Whole 10 / 3#		Chicken, Whole 10 / 3#		Chicken, Whole 10 / 3#		Chicken, Whole 10 / 3#		Chicken, Whole 10 / 3#	
Corn 24/#300 can		Corn 24/#300 can		Corn 24/#300 can		Corn 24/#300 can		Corn 24/#300 can	
Creamed Corn 24/#300 can		Creamed Corn 24/#300 can		Creamed Corn 24/#300 can		Creamed Corn 24/#300 can		Creamed Corn 24/#300 can	
Figs, Dried 24/1#		Figs, Dried 24/1#		Figs, Dried 24/1#		Figs, Dried 24/1#		Figs, Dried 24/1#	
Peaches 24/#300 can		Peaches 24/#300 can		Peaches 24/#300 can		Peaches 24/#300 can		Peaches 24/#300 can	
Peanut Butter 12/18 oz		Peanut Butter 12/18 oz		Peanut Butter 12/18 oz		Peanut Butter 12/18 oz		Peanut Butter 12/18 oz	
Sweet Potatoes 24/#300 can		Sweet Potatoes 24/#300 can		Sweet Potatoes 24/#300 can		Sweet Potatoes 24/#300 can		Sweet Potatoes 24/#300 can	

EMERGENCY FOOD BOX (PANTRY) INFORMATION: (FOOD GIVEN OUT TO INDIVIDUALS TO BE PREPARED AT HOME)
****PLEASE RECORD ACTUAL NUMBER OF INDIVIDUALS SERVED**

****RECORD ENDING MONTHLY INVENTORY ON PAGE 2**

NUMBER OF HOUSEHOLDS – TOTAL _____

NUMBER OF INDIVIDUALS - TOTAL _____

