THE EMERGENCY FOOD ASSISTANCE PROGRAM

Revised 6/18/2019

AGENCY MONTHLY INVENTORY REPORT - BONUS

NAME OF ORGANIZATION: _____ DATE: _____

NAME: _____ COUNTY: _____

PHONE NUMBER: _____ REPORTING MONTH: _____

(Full cases to be counted for inventory) FOOD LOSS: ATTACH COPY OF FOOD LOSS REPORT TO INVENTORY

CODE#	USDA DONATED FOOD NAME	BEGINNING BALANCE	PRODUCT RECEIVED	TOTAL A & B	PRODUCT ISSUED	*FOOD LOSS	ENDING BALANCE
110151	APPLES FRESH CTN-37-40 LB			0			0
110561	APPLES FRESH PKG-12/3 LB			0			0
111060	BEANS - GARBANZO/CHICK PEAS			0			0
100376	BEANS - DRY SPLIT PEA			0			0
111057	BEANS - DRY SPLIT PEA YELLOW			0			0
111032	BEANS - NAVY DRY PKG-12/2 LB			0			0
100382	BEANS - PINTO DRY			0			0
111031	BEANS - RED KIDNEY CAN-24/300			0			0
110623	BLUEBERRY HIGHBUSH FRZ			0			0
110841	CHEESE CHED CHUNKS-12/1 LB			0			0
110843	CHEESE CHED SHRED-PKG 6/2 LB			0			0
110199	CHEESE PROCESS REG LVS-6/5 LB			0			0
111053	CORN FRZ CTN-12/2.5 LB			0			0
100300	CRANBERRIES DRIED 16/30 OZ			0			0
110845	EGGS WHOLE FRZ CTN-12/2 LB			0			0
110345	FISH PLCK FILLETS FRZ -20/2 LB			0			0
111051	GRAPES FRESH CTN-19 LB			0			0
100275	JUICE - CRANBERRY CAN-12/11.5 OZ			0			0
100897	JUICE - ORANGE BTL			0			0
111013	MILK - FRESH WHOLE			0			0
111006	MILK - INSTANT PKG-24/12.8 OZ			0			0
111004	MILK 2%			0			0
111071	ORANGES - BAG PKG-12/3 LB			0			0
100283	ORANGES CTN-34-39 LB			0			0
110660	PEANUT BUTTER JAR-12/18 OZ			0			0
111140	PEANUT BUTTER JAR-12/16 OZ			0			0
111090	PISTACHIO			0			0
111130	PLUMS FRESH CTN-28 LB			0			0
100139	PORK CAN			0			0
111030	PORK PATTY CKD PKG-20/2 LB			0			0
110980	PORK PULLED CKD/SHREDDED			0			0
111040	PORK TACO CKD PKG-20/2 LB			0			0
101019	POTATOES FRESH BAG-10/5 LB			0			0
100319	PUMPKIN CAN-24/300			0			0
100491	RICE US#2 LONG GRAIN			0			0
				0			0
				0			0
				0			0
TOTAL		**0**	**0**	**0**	**0**	**0**	**0**

THE EMERGENCY FOOD ASSISTANCE PROGRAM

Revised 6/18/2019

AGENCY MONTHLY INVENTORY REPORT - ENTITLEMENT

NAME OF ORGANIZATION: ____________________ DATE: ____________

NAME: ____________________ COUNTY: ____________

PHONE NUMBER: ____________________ REPORTING MONTH: ____________

(Full cases to be counted for inventory) FOOD LOSS: ATTACH COPY OF FOOD LOSS REPORT TO INVENTORY

CODE#	USDA DONATED FOOD NAME	BEGINNING BALANCE	PRODUCT RECEIVED	TOTAL A & B	PRODUCT ISSUED	FOOD LOSS	ENDING BALANCE
110361	APPLESAUCE CUP			0			0
100382	BEANS - PINTO DRY			0			0
100526	BEEF STEW - CANNED			0			0
110163	CRM OF CHICKEN SOUP - 12/22 OZ			0			0
100899	JUICE - CRANBERRYAPPLE BTL			0			0
100295	RAISINS			0			0
110163	SOUP CRM OF CHICKEN			0			0
110450	SPAGHETTI PASTA			0			0
100335	SPAGHETTI SAUCE MEATLESS			0			0
100194	TUNA CHUNK CAN-24/12 OZ			0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
				0			0
TOTAL		0	0	0	0	0	0

FOOD PANTRIES ____________ Total Households Served ____________ Total Persons Served

SOUP KITCHEN ____________ Total Individuals Served

The above information is complete and correct to the best of my knowledge and is in compliance with the agreement for program requirements.

Signature: ______________________________ **Date:** ____________

Complete this form on or after the last day of the month and submit the report to Harvest Regional Food Bank:
Mail to: P.O. Box 707, Texarkana, TX 75504 **Fax:** (870) 774-1905 **Email:** Programs@HRFB.org