



MONTHLY TEFAP DISTRIBUTION REPORT

AGENCY NAME AND NUMBER		#
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THIS REPORT IS DUE TEN DAYS AFTER THE END OF EACH MONTH. PLEASE CIRCLE THE MONTH YOU ARE REPORTING:

January	February	March	April	May	June	July	August	September	October	December	Year 201__	
NUMBER OF INDIVIDUAL CANS AND BAGS	NAME OF FOOD ITEM											
1. Commodities on hand at beginning of month. <i>(Line 6 previous month)</i>												
2. Commodities received from Feed More during month.												
3. Commodities received as transfer per Feed More.												
4. Total of lines 1, 2 and 3.												
5. Commodities distributed to individuals and families.												
6. Commodities on hand at the end of the month.												
7. Damaged during month.												
8. Total of Lines 5, 6 and 7.												

Continue totals on page 2

NUMBER OF INDIVIDUAL CANS AND BAGS	NAME OF FOOD ITEM											
1. Commodities on hand at beginning of month. <i>(Line 6 previous month)</i>												
2. Commodities received from Feed More during month.												
3. Commodities received as transfer per Feed More.												
4. Total of lines 1, 2 and 3.												
5. Commodities distributed to individuals and families.												
6. Commodities on hand at the end of the month.												
7. Damaged during month.												
8 .Total of Lines 5, 6 and 7.												

PLEASE CHECK YOUR WORK. Line 4 should match Line 8. If they do not match, please explain the difference in the comments section below. Report on Line 7 items discarded due to damage.

Total households received food during the month: _____ **Signature:** _____

CHILDREN _____ Under 18 ADULTS _____ 18-59
 SENIORS _____ 60+

Print Name: _____

Phone Number: _____

Total individuals received food during the month: _____ **Date:** _____

COMMENTS: _____

Please scan and email this report to: Joel Middleton JMiddleton@FeedMore.org or mail to Feed More 1415 Rhoadmiller Street, Richmond, VA 23220