



# Food Pantry

# Monthly Reporting Instructions

Revised June 2018

# What's new in the 2018 version


- Simplified “Other Food Assistance” field
- Condensed donation field for farms and garden
- Categorized food waste fields

# General reporting guidelines

- Don't hesitate to contact your FFLC Partner Agency Services Coordinator with questions
- Each agency receives a reminder on the 5<sup>th</sup> of the month that their report is due on the 10<sup>th</sup>
- Agencies with consistently late reports or multiple overdue reports may have their access to FFLC food withheld until the reports are submitted
  - Refer to the FFLC Late Reporting Guidelines for more information

# Filling out your Monthly Report

## PANTRY Monthly Report



Period covered by this report Month  Year

Agency Name   
 Report Prepared by   
 Phone/email

Return to Partner Agency Services  
 phone: 541-343-2822  
 email: reports@foodforlanecounty.org  
 fax: 541-343-5019  
 mail: 770 Bailey Hill Rd.  
 Eugene, OR 97402

**Reports are due on the 10th of the month.**

**Individuals served**  
 Please report all individuals who received emergency food boxes from your agency during the reporting month.

**Definitions**

**1st time served (new):** A client who has not received food assistance since July 1st.  
**Previously served:** A client who has received food assistance since July 1st. If a client gets more than one food box within the month, count the client for each food box received.  
**Children:** Individuals under 18 years old    **Adults:** Individuals 18 years and older  
**Unknown:** Not specified whether client is adult or child

	1st time served	Previously served	
# adult points of service this month	<input type="text"/>	<input type="text"/>	
# child points of service this month	<input type="text"/>	<input type="text"/>	
# unknown points of service this month	<input type="text"/>	<input type="text"/>	
<b>TOTAL</b>	<input type="text"/>	<input type="text"/>	<b>TOTAL</b>

For all 1st time clients, fill out the information below. Each column should equal the total 1st time food box recipients.

	Ethnicity	Race	
	Hispanic origin <input type="text"/>	White/Caucasian <input type="text"/>	
	Non-Hispanic origin <input type="text"/>	Black/African American <input type="text"/>	
	Unknown/Decline to answer <input type="text"/>	American Indian/Alaskan Native <input type="text"/>	
	<b>TOTAL</b> <input type="text"/>	Asian <input type="text"/>	
		Native Hawaiian/Pacific Islander <input type="text"/>	
		Multiracial <input type="text"/>	
		Unknown/Decline to answer <input type="text"/>	
		<b>TOTAL</b> <input type="text"/>	

These three cell numbers should match

**Households/Food boxes**  
 Please report the number of food boxes you gave out to 1st time and returning households.

# new households/1st time food boxes	<input type="text"/>
# previously served households/subsequent food boxes	<input type="text"/>
<b>TOTAL</b>	<input type="text"/>

**Other food assistance**  
 Please provide a count of individuals who received food a method other than an Emergency Food Box. A household may be counted more than once here.

# of households benefitting from other method of food distribution  Households  
 (i.e. produce table, weekly pick-up table, "To-go" or overnight bags...)

**Food Supply**

	yes	no
Were you able to provide a 3-5 day supply of food (12-20#/person) in each food box?	<input type="text"/>	<input type="text"/>
Did you turn anyone away for lack of food to give?	<input type="text"/>	<input type="text"/>
Did you turn anyone away for any other reason?	<input type="text"/>	<input type="text"/>

If yes, why?

**Volunteers**  
 Please include the total number of volunteers that worked for your pantry this month, and the hours they worked.

Number of volunteers       Number of volunteer hours

**Donations**  
 Please report all donations you received from the following donors in pounds (lbs.). Do not include food received from FOOD for Lane County.

Albertsons <input type="text"/> #	Costco <input type="text"/> #	Safeway <input type="text"/> #	Cash & Carry <input type="text"/> #
Fred Meyer <input type="text"/> #	Starbucks <input type="text"/> #	Oroweat <input type="text"/> #	Ray's <input type="text"/> #
Market of Choice <input type="text"/> #	Trader Joes <input type="text"/> #	Walmart <input type="text"/> #	Winco <input type="text"/> #

Other  #      **Other Statewide Donors include:** Sara Lee, Whole Foods, Dollar Tree, Franz Bread, Frito Lay, Attune, Panera Bread, K-Mart, Lochmead Dairy

**Other Food Resources**  
 Please report all donations you received from the following donors in pounds (lbs.). Do not include food received from FOOD for Lane County.

Local Food Industry/Stores <input type="text"/> #	Local Food Drives <input type="text"/> #
Individuals/Groups <input type="text"/> #	Food Purchase (not thru FFCL) <input type="text"/> #
Farms or Locally Grown Produce <input type="text"/> #	Cost of Food Purchase (not thru FFCL) \$ <input type="text"/>

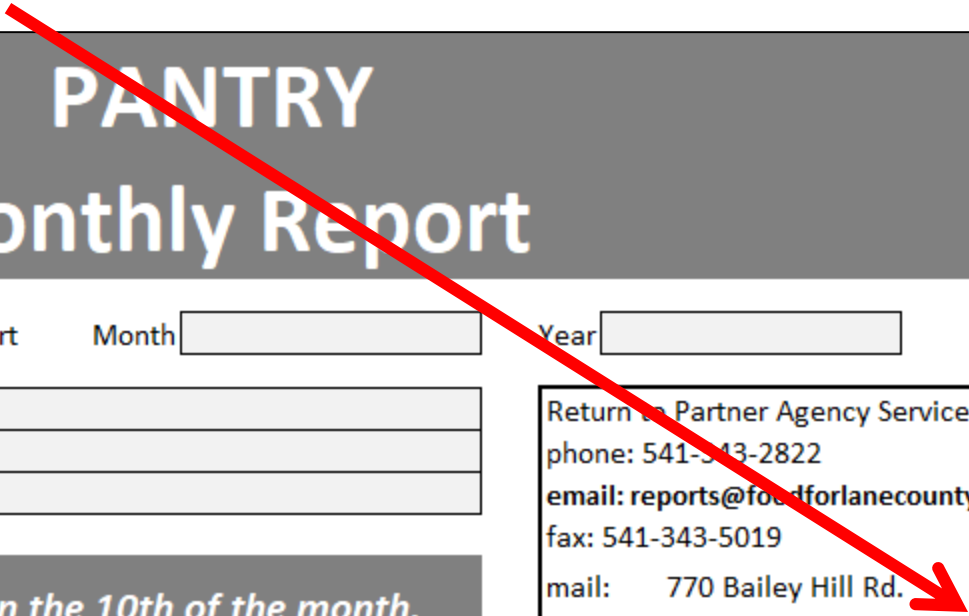
**Waste**

	yes	no
Did you discard any food this month?	<input type="text"/>	<input type="text"/>
If yes, how many pounds did you discard?	<input type="text"/>	
What type of food did you discard?	<input style="width: 100%;" type="text"/>	
What was the reason it was discarded?	<input style="width: 100%;" type="text"/>	

# Choosing the correct report

The correct report for fiscal year 2018-19 can be easily identified by the “v. 2018” text in the box at top of the page. If you do not have the current version, visit the Partner Agency Zone or contact FOOD for Lane County.

You may be asked to resubmit a report that is turned in on an old form.



**PANTRY**  
**Monthly Report**

Period covered by this report    Month     Year

Agency Name   
Report Prepared by   
Phone/email

**Return to Partner Agency Services**  
phone: 541-343-2822  
email: [reports@foodforlanecounty.org](mailto:reports@foodforlanecounty.org)  
fax: 541-343-5019  
mail: 770 Bailey Hill Rd.  
Eugene, OR 97402    v. 2018

**FOOD**  
For Lane County

*Reports are due on the 10th of the month.*

# Choosing the correct month

The “Month” field refers to the calendar month you are reporting on, not necessarily the month you are submitting the report. Reports are due by the 10<sup>th</sup> of the following month. A report detailing your food service in January, for example, would be due February 10<sup>th</sup>.

## PANTRY Monthly Report



Period covered by this report

Month

Year

Agency Name

Report Prepared by

Phone/email

Return to Partner Agency Services

phone: 541-343-2822

email: [reports@foodforlanecounty.org](mailto:reports@foodforlanecounty.org)

fax: 541-343-5019

mail: 770 Bailey Hill Rd.

Eugene, OR 97402

v. 2018

*Reports are due on the 10th of the month.*

# Your Agency's Information

Please fill in all requested information in these fields to ensure efficient communication if we have questions.



## PANTRY Monthly Report



Period covered by this report Month  Year

Agency Name   
Report Prepared by   
Phone/email

Return to Partner Agency Services  
phone: 541-343-2822  
email: [reports@foodforlanecounty.org](mailto:reports@foodforlanecounty.org)  
fax: 541-343-5019  
mail: 770 Bailey Hill Rd.  
Eugene, OR 97402 v. 2018

*Reports are due on the 10th of the month.*

# Submitting your report

Reports are due to your Partner Agency Services Coordinators on the *10<sup>th</sup> of each month*. Please create a reminder on your calendar or phone. Reports can be emailed, mailed, faxed, or dropped off in person.

Our preference is that you email your reports to [reports@foodforlanecounty.org](mailto:reports@foodforlanecounty.org)


## PANTRY Monthly Report

Period covered by this report    Month  Year

Agency Name   
Report Prepared by   
Phone/email

**Return to Partner Agency Services**  
phone: 541-343-2822  
email: [reports@foodforlanecounty.org](mailto:reports@foodforlanecounty.org)  
fax: 541-343-5019  
mail: 770 Bailey Hill Rd.  
Eugene, OR 97402    v. 2018

*Reports are due on the 10th of the month.*





# Service Statistics

Please report all Emergency Food Box points of service here. More detail on the following slides.

## Individuals served

Please report all individuals who received emergency food boxes from your agency during the reporting month.

### Definitions

- 1st time served (new):** A client who has not received food assistance since July 1st.
- Previously served:** A client who has received food assistance since July 1st. If a client gets more than one food box within the month, count the client for each food box received.
- Children:** Individuals under 18 years old
- Adults:** Individuals 18 years and older
- Unknown:** Not specified whether adult or child

	1st time served	Previously served	
# adult points of service this month			
# child points of service this month			
# unknown points of service this month			TOTAL
TOTAL			

For all 1st time clients, fill out the information below. Each column should equal the total 1st time food box recipients.

### Ethnicity

Hispanic origin	
Non-Hispanic origin	
Unknown/Decline to answer	
TOTAL	

### Race

White/Caucasian	
Black/African American	
American Indian/Alaskan Native	
Asian	
Native Hawaiian/Pacific Islander	
Multiracial	
Unknown/Decline to answer	
TOTAL	

These three cell numbers should match

# Service Statistics

**1<sup>st</sup> time served** means a client has not received food since July 1. Every July 1, everybody becomes “new” again.

If a client has received a food box since July 1<sup>st</sup>, count that point of service here.

**Individuals served**  
Please report all individuals who received emergency food boxes from your agency during the reporting month.

**Definitions**  
**1st time served (new):** A client who has not received food assistance since July 1st.  
**Previously served:** A client who has received food assistance since July 1st. If a client gets more than one food box within the month, count the client for each food box received.  
**Children:** Individuals under 18 years of age. **Adults:** Individuals 18 years and older  
**Unknown:** Not specified whether adult or child

	1st time served	Previously served	
# adult points of service this month			
# child points of service this month			
# unknown points of service this month			TOTAL
<b>TOTAL</b>			

For all 1st time clients, fill out the information below. Each column should equal the total 1st time food box recipients.

Ethnicity	Hispanic origin		Race	White/Caucasian	
	Non-Hispanic origin			Black/African American	
	Unknown/Decline to answer			American Indian/Alaskan Native	
	<b>TOTAL</b>			Asian	
				Native Hawaiian/Pacific Islander	
		Multiracial			
		Unknown/Decline to answer			
		<b>TOTAL</b>			

These three cell numbers should match

**NOTE: If a client gets 2 food boxes within a month, both points of service must be counted and reported.**

# Service Statistics

**NOTE: If a client gets 2 food boxes within a month, both points of service must be counted and reported.**

Example: A client with a household of three (one adult, two children) visits your pantry for the first time on April 1. They are counted as new clients. They visit again on April 20. They are now counted as previously served clients. If they visit again in May, they will continue to be counted as previously served.

## Individuals served

*Please report all individuals who received emergency food boxes from your agency during the reporting month.*

### Definitions

**1st time served (new):** A client who has not received food assistance since July 1st.

**Previously served:** A client who has received food assistance since July 1st. If a client gets more than one food box within the month, count the client for each food box received.

**Children:** Individuals under 18 years old      **Adults:** Individuals 18 years and older

**Unknown:** Not specified whether adult or child

	1st time served	Previously served	
# adult points of service this month	1	1	
# child points of service this month	2	2	
# unknown points of service this month	0	0	
<b>TOTAL</b>	<b>3</b>	<b>3</b>	<b>TOTAL 6</b>

# Service Statistics

Clients must self-disclose on the USDA sign-in form the total number of people who live in their household. It is optional for them to specify how many of those people are adults (18+) or children (17 & under).

If a client includes adult/child information on the USDA sign-in, be sure to report it in the appropriate section.

If the client does not specify the number of adults and children in their household on the sign-in sheet, the total household number should go under “# unknown points of service.”

## Individuals served

Please report all individuals who received emergency food boxes from your agency during the reporting month.

Definitions

**1st time served (new):** A client who has not received food assistance since July 1st.

**Previously served:** A client who has received food assistance since July 1st. If a client gets more than one food box within the month, count the client for each food box received.

**Children:** Individuals under 18 years old      **Adults:** Individuals 18 years and older

**Unknown:** Not specified whether adult or child

	1st time served	Previously served	
# adult points of service this month			
# child points of service this month			
# unknown points of service this month			TOTAL
TOTAL			

# Service Statistics

For *first time clients only* (i.e., a client's first visit after every July 1), please include their race and ethnicity. *Ethnicity* refers to an individual's *cultural identity*. *Race* refers to their *physical attributes or ancestry*.

This information is optional; do not require or dissuade a client from sharing this information. FFLC follows the USDA's definitions of ethnicity and race. This demographic information allows us to better understand who visits our pantries and identify possible gaps in service.

**Individuals served**  
Please report all individuals who received emergency food boxes from your agency during the reporting month.

**Definitions**  
**1st time served (new):** A client who has not received food assistance since July 1st.  
**Previously served:** A client who has received food assistance since July 1st. If a client gets more than one food box within the month, count the client for each food box received.  
**Children:** Individuals under 18 years old      **Adults:** Individuals 18 years and older  
**Unknown:** Not specified whether adult or child

	1st time served	Previously served	
# adult points of service this month			
# child points of service this month			
# unknown points of service this month			
<b>TOTAL</b>			<b>TOTAL</b>

For all 1st time clients, fill out the information below. Each column should equal the total 1st time food box recipients.

Ethnicity	Race
Hispanic origin	White/Caucasian
Non-Hispanic origin	Black/African American
Unknown/Decline to answer	American Indian/Alaskan Native
<b>TOTAL</b>	Asian
	Native Hawaiian/Pacific Islander
	Multiracial
	Unknown/Decline to answer
	<b>TOTAL</b>

These three cell numbers should match

# Service Statistics

**NOTE: The totals in the three red dashed cells must all be equal.**

**The TOTAL for ethnicity and TOTAL for race should equal the TOTAL 1<sup>st</sup> time served. If there is a discrepancy in the numbers, you should make up the difference in the appropriate “Unknown/Decline to answer” cell.**

## Individuals served

Please report all individuals who received emergency food boxes from your agency during the reporting month.

**Definitions**  
**1st time served (new):** A client who has not received food assistance since July 1st.  
**Previously served:** A client who has received food assistance since July 1st. If a client gets more than one food box within the month, count the client for each food box received.  
**Children:** Individuals under 18 years old      **Adults:** Individuals 18 years and older  
**Unknown:** Not specified whether adult or child

	1st time served	Previously served	
# adult points of service this month	75	151	
# child points of service this month	65	80	
# unknown points of service this month	13	33	
<b>TOTAL</b>	<b>153</b>	<b>264</b>	<b>TOTAL 417</b>

For all 1st time clients, fill out the information below. Each column should equal the total 1st time food box recipients.

Ethnicity	Hispanic origin	40
	Non-Hispanic origin	65
	Unknown/Decline to answer	48
	<b>TOTAL</b>	<b>153</b>

Race	White/Caucasian	35
	Black/African American	30
	American Indian/Alaskan Native	25
	Asian	20
	Native Hawaiian/Pacific Islander	15
	Multiracial	5
	Unknown/Decline to answer	23
	<b>TOTAL</b>	<b>153</b>

**These three cell numbers should match**

# Households/Food Boxes Served

Similar to counting individuals, count each household's first visit after every July 1 as "New". Count each household's subsequent visits as "Previously served".

## Households/Food boxes

*Please report the number of food boxes you gave out to 1st time and returning households.*

# new households/1st time food boxes	<input type="text"/>
# previously served households/subsequent food boxes	<input type="text"/>
TOTAL	<input type="text"/>

# Other Food Assistance

If your agency provides any form of food *in addition to the annual limit of emergency food boxes*, record it here. **Other food assistance** could include a bonus deliveries of supplemental food, a produce or bread table, to-go bags, or overnight bags.

You only need to count households for this field. This is a combined, duplicated number. No need to identify “new” households.

## Other food assistance

*Please provide a count of households who received any form of food in addition to an Emergency Food Box. A household may be counted more than once here.*

# of households benefitting from other method of food distribution  Households  
(e.g. supplemental food, produce or weekly pick-up table, "To-go" or overnight bags...)



# Food Supply

Did you have the appropriate amount of food for all clients?

Did you need to turn anyone away for *any* reason?

Please let us know here.

Food Supply		
	yes	no
Where you able to provide a 3-5 day supply of food (12-20#/person) in each food box?	<input type="checkbox"/>	<input type="checkbox"/>
Did you turn anyone away for lack of food to give?	<input type="checkbox"/>	<input type="checkbox"/>
Did you turn anyone away for any other reason?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, why?	<input type="text"/>	

# Volunteer Information

Please include the total number of volunteers (duplicated) you had and the total number of hours they worked.

## Volunteers

*Please include the total number of volunteers that worked for your pantry this month, and the hours they worked.*

Number of volunteers

Number of volunteer hours

# Food Donations

Please list all donations that you may have received from the *listed retail donors only*.

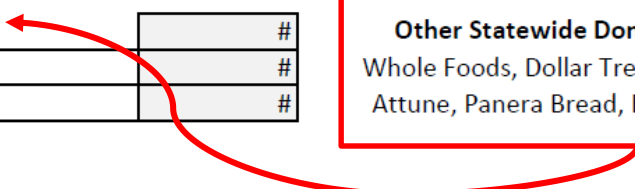
If you receive donations from a company or group not listed in this section, that number will go in the following section, “Other Food Resources”.

## Donations

Please report all donations you received from the following donors in **pounds (lbs.)**. Do not include food received from FOOD for Lane County.

Albertsons	<input type="text"/>	#	Costco	<input type="text"/>	#	Safeway	<input type="text"/>	#	Cash & Carry	<input type="text"/>	#
Fred Meyer	<input type="text"/>	#	Starbucks	<input type="text"/>	#	Oroweat	<input type="text"/>	#	Ray's	<input type="text"/>	#
Market of Choice	<input type="text"/>	#	Trader Joes	<input type="text"/>	#	Walmart	<input type="text"/>	#	Winco	<input type="text"/>	#
Other	<input type="text"/>	#									
Other	<input type="text"/>	#									
Other	<input type="text"/>	#									

**Other Statewide Donors include:** Sara Lee, Whole Foods, Dollar Tree, Franz Bread, Frito Lay, Attune, Panera Bread, K-Mart, Lochmead Dairy



# Other Food Resources

Use these fields to record donations from businesses not listed in the previous section, as well as church groups, service groups, individuals, and any food drive efforts. You will also report on the cost and weight of food that your agency may have purchased.

## Other Food Resources

*Please report all donations you received from the following donors in **pounds (lbs.)**. Do not include food received from FOOD for Lane County.*

Local Food Industry/Stores	<input type="text"/>	#	Local Food Drives	<input type="text"/>	#
Individuals/Groups	<input type="text"/>	#	Food Purchase (not thru FFLC)	<input type="text"/>	#
Farms or Locally Grown Produce	<input type="text"/>	#	Cost of Food Purchase (not thru FFLC)	<input type="text"/>	\$



We are no longer asking pantries to separately record food received from farms. Any and all locally grown or raised food can be added together in this field.

# Waste

Please include all food *that you received from FOOD for Lane County* that you had to discard because it was unfit for human consumption, or because you were not able to distribute it.

Add up the total weight of any food discarded that month and record it in the appropriate field.

Common food categories are provided for you. If you discarded food of this type, provide a brief reason why. Suggested language is listed below the fields.

Waste						
Did you discard any food this month?		yes	no			
		X				
If yes, how many pounds did you discard?		75	#			
Canned	Other Dry Goods	Produce	Frozen	Dairy	Bread	Repack (dry, frozen)
<i>Rusted</i>		<i>Rotten</i>			<i>Moldy</i>	
Suggested reasons: Expired/Outdated, Spoiled/Rotten, Rusted/Dented, Damaged Package/Label, Surplus, Recalled						



# Questions?

If you have any questions, please contact your Partner Agency Services Coordinator

- Nathan Keffer
  - [nkeffer@foodforlanecounty.org](mailto:nkeffer@foodforlanecounty.org)
  - 541-343-2822 Ext 134
- Mallory Davis
  - [mdavis@foodforlanecounty.org](mailto:mdavis@foodforlanecounty.org)
  - 541-343-2822 Ext 110