



MONTHLY REPORT CARD Pantry 2010

Hotline 417-380-5007

Phone # 417-865-3411

Fax # 417-865-0504

Data from: Month _____ Year _____

Agency Name _____ Agency # P _____

County _____ Contact Person _____

Phone # _____ Fax # _____

Agency E-MAIL _____

Number of individuals served by age group:

Number of families served:

0-18 _____

19-59 _____

60+ _____

TOTAL

Individuals
--total of the
age groups
above _____

TOTAL

families _____

how many
families are
receiving
food
stamps? _____

how many
families are
receiving
TANF? _____

_____ % of products used in your agency that came from Ozarks Food Harvest

_____ % of products donated to your agency by the community or other groups

\$ _____ Estimated cost of food purchased from all sources (OFH, grocery, etc.)

Reports are due by the 5th. Complete the entire form even if you did not shop at Ozarks Food Harvest this month. If you did not serve any people in a given category, enter a zero.

COMMENTS or Staff Changes:

