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| --- | --- |
| County: | Date Report Completed: |
| Pantry Name: |
| Pantry Director: |
| Pantry Address: |
| City: | State: WV | Zip: |

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| --- | --- | --- | --- | --- |
| 1st Quarter | July, August, September  | Report Due: Oct. 15 | Total Households |  |
| 2nd Quarter | October, November, December | Report Due: Jan. 15 | Total Households |  |
| 3rd Quarter | January, February, March | Report Due: April 15 | Total Households |  |
| 4th Quarter | April, May, June | Report Due: July 15 | Total Households |  |

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| --- | --- | --- | --- | --- | --- | --- |
| A | B | C | D | E | F | G |
| **USDA Food Item** | **Amount on Hand** | **Amount Received** | **Sub-Total** | **Amount Distributed** | **Losses/Damage** | **Balance** |
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**Instructions:**

1. Complete the top of the form
2. Complete sections A-G using your agency inventory system.
3. Mail or email by the close of business on the due date listed above.DO NOT FAX! Mail to Mountaineer Food Bank 484 Enterprise Drive Gassaway, WV 26624 or email Lisa@mountaineerfoodbank.org

**FAX WILL NOT BE ACCEPTED**