

Monthly Report Form

Second Harvest Food Bank Greater New Orleans and Acadiana

Monthly reports are due by the 5th of the following month. Agencies delinquent on submitting monthly reports will be inactivated without prior notice. You are required to submit a report even if no distributions were made during the month. Incomplete and/or inaccurate reports will not be accepted and returned to the agency.

**This form can be emailed, faxed, sent by postal service or delivered in person to:
 Second Harvest Food Bank | 700 Edwards Avenue | 504.734.1322 | 504.733.8336 fax
 agencyGNOA@secondharvest.org**

Month/Year _____ Date _____
 Name of Agency _____ ID# _____
 Physical Address _____
 Contact Person _____ Phone# _____
 Person Completing Report _____ Phone# _____

Program using Food Bank products: Food Pantry days & hours: _____ On-Site Feeding days & hours: _____ Shelter meal days & hours: _____

Demographic Breakdown:			
	New	Continued	Total
# of households			
# of children (birth-17)			
# of adults (18-64)			
# of seniors (65+)			
# of homeless			
# of temporary housing/displaced			
# of disaster relief volunteers			

Race	Male	Female	Total
African American			
White			
Hispanic/Latino			
Asian			
More Than One Race			
Unknown			
Total			

Parish Represented	# of People Served



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On-site Feeding (All soup kitchens, shelters, residential facilities and snack only programs)

# of Breakfast served	
# of Lunches served	
# of Dinners served	
# of Snack served	
Total	
% of total food distributed from GNOA	

Pantry (Food Box and Quarterly included)

# of Boxes/Bags & pounds per bag/box	
# of Meals Provided	
% of total food distributed from GNOA	

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# of households by parish	
# of individuals by parish	
# of children under 18 by parish	
# of seniors over 65 by parish	

Please provide one story of a person or family helped with the food in the previous month (do not use real names). Please share a story that the Food Bank would have permission to use for fundraising or public relations materials.

