

EFFECTIVE DATE: April 1, 2004

EXHIBIT K

RECORDS FOR SUB-DISTRIBUTOR REVIEW

Name & Address of Site:

Email: _____

Phone: _____

Fax: _____

Date of Visit:

Name and Title of Contact Person:

What type of site?

Pantry _____ SK _____ FB _____

Other (specify) _____

	YES	NO	N/A	COMMENTS
1. Does this agency receive TEFAP Commodities from another Food Bank? Name:				
2. Does this site have a written agreement with the providing Food Bank(s)?				
3. Does this site give food to other agencies? Obtain a list of these agencies.				
4. Does this site have a written agreement with these agencies?				
5. Does the site maintain eligibility documentation for each recipient?				
Do the eligibility documents contain the following:				
a. Recipient's Name?				
b. Recipient's Address?				
c. Applicant's Signature?				
d. Statement of need, based on income, or participation in other means-tested programs?				
e. Number of people in household?				
f. Non-discrimination statement?				
g. Appropriate certification statement?				
6. Does this site have signed receipts listing the type and quantity of TEFAP food received?				
7. Is this the only storage facility for TEFAP commodity storage?				
8. Is area secure from theft?				
9. Is all food stored on pallets or shelves? If no, elaborate:				
10. Is food stored separately from non-food items that can contaminate?				
11. Is area free from signs of infestation?				
12. Are there regular extermination treatments? Last date:				
13. Are temperatures taken and recorded in all areas where TEFAP foods are stored?				
14. If site is a SK or other congregate feeding site, has a health inspection been performed? If so, When? Performance Rating:				

15. For Pantries: Using agency information available, or record of foods distributed by date, determine the number of households served for the last 12 months. Divide that number by 12 to arrive at an **average monthly figure** of households served. Record below:

Jan. _____ May _____ Sept. _____
 Feb. _____ June _____ Oct. _____
 Mar. _____ July _____ Nov. _____
 Apr. _____ Aug. _____ Dec. _____

Total: _____ ÷ 12 = _____
 Monthly Average

16. For Soup Kitchens: Using the agency information available by date, determine the number of meals served for the last 12 months. Divide that number by 12 to arrive at an **average monthly figure** for number of meals served. Record below.

Jan. _____ May _____ Sept. _____
 Feb. _____ June _____ Oct. _____
 Mar. _____ July _____ Nov. _____
 Apr. _____ Aug. _____ Dec. _____

Total: _____ ÷ 12 = _____
 Monthly Average

Comments: _____

 Signature of Reviewer

 Signature of Sub-Distributor