

Agency Activity Report

Test New Agency
 Agency #0001
 test
 test, test 12345
 phone: 999-555-1212
[\[edit agency profile\]](#)

REPORT IS DUE NO LATER THAN THE 10TH OF THE FOLLOWING MONTH
 TO AVOID A LATE CHARGE, AN INTERRUPTION OR SUSPENSION OF FOOD BANK PRIVILEGES

Report For Month/Year /

Pantry Programs (enter zeroes if you do not run a pantry)

1. How many FAMILY UNITS were assisted during this reporting period:

Each family is counted EVERY TIME you serve them, a single person is counted as a family.

2. Total number of PERSONS within those family units:

Count every person within each family receiving assistance.

3. What percentage of your agencies food came from the Food Bank of West Central Texas?

Of all the food your agency served to needy people, what portion came from FBWCT?

 %

Feeding Programs (enter zeroes if you do not run a feeding program)

1. What was the TOTAL NUMBER of meals served during the month:

Tally each person fed on each day at each meal. Record TOTAL breakfasts, TOTAL lunches, and TOTAL suppers.

Breakfast Lunch Supper

2. What was the total number of supplemental meals (snacks) served:

Count the total number of people at each snack on each day.

3. What percentage of food used comes from the Food Bank of West Central Texas?

Of all the food your agency served to needy people, what portion came from FBWCT?

 %

Name of Person Preparing This Report

Title

Telephone Number

Email