

Food Distribution Log

Month/Year: _____

Agency: _____

Agency #: _____

	<u>Date</u>	<u>Name</u>	<u>Address</u>	<u># of Adults</u>	<u># of Children</u>	<u>Employed (Y or N)</u>	<u>Receive Government Assistance (Y or N)</u>	<u>Signature</u>
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