Non-Emergency Feeding Program Statistics

This report must be entered on eHarvest or received by Mid-Ohio Foodbank before and no later than the 10th day of each month. Otherwise, your agency will automatically go on “HOLD” and you will not be able to order product until we receive your statistics.

Report Month ____________20___  Agency Number ____________
Agency Name __________________________
Contact Name __________________________
Contact E-mail __________________________  Phone No. ____________

Type of Program: After School ___  Day Care ___  Youth/Camp ___
Youth Residence ___  Adult/Senior Residence ___  Adult Group Home ___
Adult Rehab ___

Number of meals provided this month
(ie: 6 people at the table for breakfast, multiplied by 30 days in the month would equal 180 breakfast meals)
1. Breakfasts
2. Lunches
3. Dinners
Total Meals

Number of substantial snacks provided this month

Number of different individuals who were provided with one or more meals and/or snacks during the month

If you were Closed or didn’t serve this month
We did not provide any food to clients this month (check mark).

4 Ways to submit your monthly stats:
1) Enter online through eHarvest — eh,midohiofoodbank.org
2) Email to — stats@midohiofoodbank.org
3) Fax to — 614-317-9708
4) Mail to — Mid-Ohio Foodbank, Attn: Agency Services
   3960 Brookham Drive, Grove City, OH 43123