

## **Member Agency MONTHLY STATISTICS REPORT FY24-25**

| Month | of |  |
|-------|----|--|
|       |    |  |

Please follow instructions carefully. Complete Section 1. Next, select the appropriate Program Sections, #2 through #4, that coincide with your agency's services and insert your monthly totals. If food was not distributed during the month, enter "None" or "0". Multi-service agencies are to complete all applicable sections.

| Section 1 – Completed by All Agencies (Please notify the Food Bank of ANY CHANGE IN AGENCY INFORMATION.)  |   |  |  |  |  |
|---|---|--|--|--|--|
| Name of Agency:.  |   |  |  |  |  |
| Address:  | 0   | City:  | Zip:   |  |  |
| County:   | Phone:  |  |  |  |  |
| Contact:  | Email (If available):   |  |  |  |  |
| SECTION 2 - MC  | Food Pantry:  |  |  |  |  |
| A. Total Number of <u>DIFFERENT</u> households served ONCE THIS MONTH: _      B. Total Number of households served this month:      C. Of the households listed in 2A, how many were served for                                   |   |  | Agency #: (Pantry agency numbers begin with a 1)   |  |  |
| the first time since July 2024?  D. Total Number of Children Served (0-17 years):  E. Total Number of Adults (18-59 years):  F. Total Number of Senior Citizens (60+ years):  G. Total Number of People Served this month(D+E+F): |   | A Food Pantry is a program that provides emergency food bags or boxes and/or monthly supplemental food assistance to people in need to prepare at home |  |  |  |
| SECTION 3- MONTHLY DATA-SOUP KITCHENS/SNACKS & SHELTERS  A. Number of Meals Served:   | Soup Kitchens/Snacks & Shelters:  Agency #: (Soup/Snack agency numbers begin with a 2)  Agency #: (Shelter agency numbers begin with a 3) | A She nights runaw Resid Cares Home  | Pkitchen/Snacks is a program rovides meals or snacks to people id.  Plter is a program that provides of shelter to homeless people, ray children or victims of abuse, ential Treatment Facilities, Day, Senior Citizen Centers, Group s, Youth Programs, Non-profit her Camps, Rehabilitation Facilities |  |  |
| SECTION 4 - MONTHLY DATA FOR SOUP KITCHENS/SN (Total number of meals per category)  A. Number of Meals Served to Children (0-18 years):  B. Number of Meals Served to Adults (19-59 years):                                       |   |  | & SHELTERS  SECTION 5- A. Total Number of Different People Served During the Month: (You may use estimate of highest meal day)   |  |  |
| C. Number of Meals Served to Senior Citizens (60+ years):  D. Total Number of Meals Served (A+B+C): (Equal to 3A)  In accordance with your Member Agency Agreement, Statistics Reports are due for each month of                  |   |  |  |  |  |

In accordance with your Member Agency Agreement, Statistics Reports are due for each month of service by the 5<sup>th</sup> of the following month. Your reports may be completed and emailed to afick@helpingharvest.org or mailed to Helping Harvest, 117 Morgan Drive, Reading, PA 19608. Please contact Helping Harvest, (610) 926-5802 x208, if you have any questions about completing your monthly reports. Thank You!