



The Emergency Food Assistance Program (TEFAP) — Subcontractor Inventory Report

If you have questions regarding your inventory, please contact your contractor. Send this completed form to your contractor.

Report Month/Year: _____ Type of distribution site: Food Pantry Meal Program

Food Pantry Name:	Meal Program Name:
Total Clients:*	Total Meals Served:
Total Household Members:	

TMP	Commodity Description	Beginning Inventory	Cases Received	Total Cases	Issued to Clients	Damage **	Book Inventory	Physical Inventory	Report Check*
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*Clients refer to the person receiving TEFAP food on behalf of their household.
 **Complete a Commodity Loss/Adjustment Report for Subcontractors for any damaged commodities, or for any overage/shortage listed on this inventory report.