Idaho Community Action Network L.F.P. Food Coordinator Report

LFP:	_ Date:
Contact Person:	Phone:
Report for the Month of:	Food Ordering Meeting Date:
Number of Families Ordered:	
Total Number of Units Ordered:	
Number of Donated Units:	
• Total pounds distributed from IFW Order: _	·
The LFP Spent \$	
Open Shopping Costs \$	
Free Items from Open Shopping were:	
Gleaning Information (Please Turn in Glean/Doz	
Total pounds of donated items:	· ·
These items were:	
Please Announce:	
This Month Food Distribution: Date, Time, Place:	
This Month Open Shopping/Bread Day: Date, Time, Place:	
This Month Gleaning Day(s): Date, Time, Place:	
Next Month's Food Ordering Meeting: Date Time Place:	•