ARIZONA DEPARTMENT OF ECONOMIC SECURITY

Division of Adult and Aging Services (DAAS) – Coordinated Hunger Relief Program

TEFAP MONTHLY INVENTORY AND PARTICIPATION REPORT (MIPR)

*See the TEFA		ng month and return it to the Food Bank MIPR) Instructions for definitions and details on how				
this form.						
Agency Name:		Reporting Month/Year:				
	RGENCY FOOD BOXES (EFB)	LARGE FAMILY BAGS				
In stock at the beginning of the month		In stock at the beginning of the month				
Received this month		Received this month				
Distributed this month		Distributed this month				
Losses (if any)		Losses (if any)				
Remaining end of month count		Remaining end of month count				
List reason(s) for <u>any</u> losses:		List reason(s) for <u>any</u> losses:				
	BULK CO	MMODITIES				
Were there bu	ılk items left over from last month?	Yes No				
If yes, were they completely distributed/used this month?		Yes No				
List reason(s)	for <u>any</u> losses:					
		MMODITIES				
Date		from prior month. List oldest first.) Cases On-Hand Cases Losses (if	Cases			
Received	Item Name	`	emaining			
		 				
		 				
		 				
	(Additional space	provided on page 2)				
	ow, you affirm the data provided on this form	is accurate to the best of your knowledge. You also a Statement on the next page even if you do not sub	mit it with			
Agency Repre	esentative Signature:	Date:				
	esentative Signature:Food	3ank Use-				
	ribution: EFBs distributed correspond with HH s llow-up was conducted and what was the resolu	•	No			
		Reviewer's Initials:				

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BULK COMMODITIES (Includes commodities on-hand from prior month. List oldest first.) Date Cases On-Hand Cases Losses (if Cases Case								
Dete	(Includes commodities on-hand from	li prior monui. Li	St Oldest III	SL.)	0			
Date Received	Item Name	or Received	Used	Losses (if any)	Cases Remaining			