

# Monthly Inventory Participation Report (MIPR) Coversheet



## Instructions

Complete and submit the MIPR Coversheet and MIPR by the 1<sup>st</sup> of the month. If the 1<sup>st</sup> of the month falls on a weekend/holiday, please submit the business day prior to the first of the month. You may email your documents to [agencyreporting@firstfoodbank.org](mailto:agencyreporting@firstfoodbank.org) or fax them to 480-613-4619. Please contact your specialist/coordinator if you need assistance completing this document.

**Agencies in the following counties must also include your signature sheets: Navajo, Apache.**

## Agency Information

Agency Name: \_\_\_\_\_ Agency Number: \_\_\_\_\_

Reporting Period (MM/YYYY) \_\_\_\_\_

## Monthly Household Distribution Totals (Unique):

*(Not applicable for Agencies using Bulk Recording Programs only)*

Households Served: \_\_\_\_\_

Individuals Served: \_\_\_\_\_

## Monthly Household Distribution Totals (Duplicated):

Households Served: \_\_\_\_\_

Individuals Served: \_\_\_\_\_

## Congregate Feeders:

Congregate Meals Served: \_\_\_\_\_

***By signing below, I affirm that the information provided is complete and accurate.***

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_