❑ FOOD PANTRY
❑ SOUP KITCHEN
❑ RESIDENTIAL

Palm Beach County Food Bank
MONTHLY DISTRIBUTION SHEET

MONTH/YEAR:_____

AGENCY NAME/NUMBER:_____

To the best of my knowledge, food provided by the Palm Beach County Food Bank was provided to Palm Beach County residents (please certify by signing below).

FORM COMPLETED & CERTIFIED BY:_____

Distribution Date:	Total # of Names:	Total # of People in Household/Meals:

MONTHLY TOTALS: _____ _____ _____

NOTE: *Food provided by the Palm Beach County Food Bank (PBCFB) is intended for Palm Beach County residents. PBCFB agrees to uphold and maintain the confidentiality of the information supplied by your agency which includes but is not limited to, client lists of information.*

Last updated: 8/17/2018