## U.S. DEPARTMENT OF AGRICULTURE - FOOD AND NUTRITION SERVICE

## MONTHLY REPORT OF THE COMMODITY SUPPLEMENTAL FOOD PROGRAM AND QUARTERLY ADMINISTRATIVE FINANCIAL STATUS REPORT

STATUS REPORT																	
SEE INSTRUCTIONS O	SEE INSTRUCTIONS ON REVERSE																
REPORTING MONTH AND YEAR	-	YPE OF SUB	MISSION				4.	NUMBER	OF PARTIC	CIPANTS						PORTINENTS	G MEASURE-
		) - INITIAL		INFANTS		INFA	ANTS	CHILDREN	PREGN <i>A</i>	NT/BREAST	POST PARTUM	TOTAL NO		TOTAL NO. OF	+	CASES	(B) UNITS
2A. ST AGENCY NAME	† (B	) - LATEST RE	€V.	(0-3) MONT (A)	THS (4-12) MONTHS		(1-6) YEARS FEE		G WOMEN	WOMEN (F)		+ D + E = 4F)	ELDERELY PART.	(1.7)			
27.1. 0.7.102.10.1.10.1.10.1	(C	) - CLOSEOUT INVENTOR						•									
2B. DA CODE								STA	ATE AND L	OCAL DATA	A						
6.	6A.	6B.	7.	8.	9.		10.	11.		12.	OMMODITY ACTIV			13.	14.		15.
СОММОДІТУ			STATE &						Y ISSUANCE	-	TOTAL	ADJUS	TMENTS	STATE &			
NAME	CODE		LOCAL		REDO	NATIONS	TOTAL	ISSUE	NUMBER ED TO:				ACTIVITY	POSI- TIVE	NEGA- TIVE	LOCAL	
		SIZE	BEGINNING	RECEIPTS	l .		INVENTORY			TOTAL	REDONAT-		AMT	(12A +B	IIVE	'''	ENDING
					"	IN AVAILABLE		W-I-C	ELDERLY	NUMBER ISSUED	IONS OUT	FOOD LOSS	USED FOR	C + D = 13)			INVENTORY
			INVENTOR	Υ			(7+8+9=10)	(4)	(D)	(11A + B = 1)	2)		NUT ED		(A)	(B)	((10-13) + OR -
								(A)	(B)	(A)	(B)	(C)	(D)				14A & B = 15)
GREEN BEANS 300	A059	24/300can															
GREEN BEANS 303	A060	24/303can															
BEANS VEG 300	A090	24/300can															
CARROTS	A095	24/303can															
CARROTS 300	A098	24/300can															
CORN KERNEL 300	A119	24/300can															
CORN CREAM	A120	24/303can															
CORN KERNEL	A121	24/303can															
CORN CREAM 300	A122	24/300can															
LENTILS	1105	40/0 !!															
	A135	12/2 lb.												+			
PEAS 300 PEAS 303	A144	24/300can 24/303can			<u> </u>								1	+			
PUMKIN	A163	24/300can			<del>                                     </del>						+			†	<del>                                     </del>		
SPINACH	A166	24/303can															
SPINACH 300	A167	24/300can												1			
POTATOES 303	A169	24/303can												1			
POTATOES SLC 300	A170	24/300can												+			
POTATOES DEHY 12	A196	12/1 lb.												+			
TOTATOES DERT 12	A130	12/110.														<u> </u>	

MONTHLY REPORT OF COMMODITY SUPPLEMENT  FOOD PROGRAM STATE AND LOCAL INVENTOR  6.					REPORTING MO	ONTH AND YE	EAR:	STATE A	GENCY NAME:			REPORT	ING MEARSURE	MENT		
FOOD PROGRAM S	TATE	AND LO	CAL INVEN	TORY								CASI	)			
							STATE AN	D LOCAL D	ATA							
COMMODITY	CODE	PACK	STATE &	8. RECEIPTS	9.  REDONATIONS  IN	INVENTORY	TOTAL I ISSUE		TOTAL NUMBER	REDONAT-	/ITY FOOD	AMT USED	13. TOTAL ACTIVITY (12A + B	14. ADJUST POSI- TIVE	NEGA- TIVE	15. STATE & LOCAL ENDING
			INVENTORY			AVAILABLE (7+8+9=10)	W-I-C (A)	(B)	ISSUED (11A + B = 12) (A)	OUT (B)	LOSS (C)	FOR NUT ED (D)	C + D = 13)	(A)	(B)	INVENTORY ((10-13) + OR - 14A & B = 15)
SWT POTATOES 303	A 2 2 1	24/202														
SWT POTATOES 303		24/303can 24/300can														
TOMATOES 300		24/300car	1													
TOMATO SAUCE 300		24/300car														
TOMATOES 303	A248	24/303car														
OD A DEEDLUT	A 200	12/46 oz.														
GRAPEFRUIT J APPLE J	A282															
GRAPE J	A285	12/46 oz.														
PINEAPPLE J	A286															
TOMATO J	A290															
ORANGE J	A300	12/46 oz.														
APPLESAUCE 303	A355	24/303can	)													
F COCKTAIL 303	A401															
F COCKTAIL 300	A403	24/300car														
PEACHES CLING 300	A411	24/300car														
PEACHES CLING 300	A412	24/303car	1													
PEARS 300	A437	24/300car														
PEARS 303	A439	24/303car														
PINEAPPLE 2	A446	24/2 can														
PLUMS 303	A461	24/303car	h													
PRUNES 24	A489	24/1 lb.														

MONTHLY REPORT	OF CO	MMODITY	SUPPLEN	/IENTAL	REPORTING MO	NTH AND YE	AR:	STATE A	GENCY NAME:			REPORTING MEARSUREMENT						
FOOD PROGRAM S	ΓΑΤΕ	AND LOCA	AL INVENT	ORY								CASES ( ) OR UNITS ( )						
						;	STATE AN	D LOCAL D	ATA									
6. COMMODITY NAME	6A.	6B. PACK SIZE	7. STATE & LOCAL BEGINNING INVENTORY	8. RECEIPTS	9. REDONATIONS IN	TOTAL INVENTORY AVAILABLE (7+8+9=10)	11. COMMODIT TOTAL I ISSUE W-I-C		TOTAL NUMBER ISSUED (11A+B=12)	REDONAT- IONS OUT (B)	FOOD LOSS (C)	AMT USED FOR NUT ED (D)	13. TOTAL ACTIVITY (12A +B C + D = 13)	14. ADJUST POSI- TIVE	MENTS  NEGA- TIVE  (B)	15.  STATE &  LOCAL  ENDING  INVENTORY ((10-13) + OR - 14A & B = 15)		
									<i>(, , , , , , , , , , , , , , , , , , , </i>	(5)	(-)	, ,						
CHICKEN CND	_	24/29 oz.																
EGG MIX 6		48/6 oz.																
STEW CND		24/24 oz.																
STEW 24/15	A589	24/15 oz.																
BEEF NJ	A610	24/29 oz.																
PORK NJ		24/29 oz.																
TUNA 12.25		24/12.25oz.																
SALMON 24	A803	24/14.75oz.																
BEANS DK R KIDNEY	A906	12/2 lb.																
BEANS BLKEYE 2	A910																	
BEANS B LIMA 2	A912	12/2 lb.																
BEANS PINTO 2	A914	12.2 lb.																
BEANS R KIDNEY 2	A915																	
BEANS GRT NORTH 2	A917	12.2 lb.																
BEANS NAVY PEA 2	A918																	
BEANS LT KIDNEY 2	A920	12.2 lb.																
PEAS SPLIT 2	A922																	

COMMODITY NAME   COMMODITY NAME   COMMODITY ACTIVITY   COMMODITY ACTIV	MONTHLY REPORT OF COMMODITY SUPPLEMENTAL					REPORTING MO	ONTH AND YE	EAR:	STATE A	GENCY NAME:			REPORTING MEARSUREMENT					
Section   Sect	FOOD PROGRAM S	TATE	AND LOC	AL INVEN	TORY								CASES ( ) OR UNITS ( )					
COMMODITY   NAME   PACK   STATE & LOCAL   SEGINMAN   NEWTORY   NAME   CONTINUAL   PACK   SUBJECT   TOTAL   SUBJECT   T								STATE AN	D LOCAL D	ATA								
EVAP 12 B081 48/12 Fl oz   SOUTH   SOU			PACK	STATE &	RECEIPTS	REDONATIONS	TOTAL INVENTORY AVAILABLE	TOTAL I ISSUE	Y ISSUANCE NUMBER D TO:	TOTAL NUMBER	REDONAT- IONS	FOOD	USED	TOTAL ACTIVITY (12A +B	ADJUST POSI-	NEGA-	STATE &	
INSTANT 24 B090 6/4 lb.				INVENTORY						(11A + B = 12)			NUT ED		(A)	(B)	((10-13) + OR -	
EVAP 24 8117 24/12 F1 02 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	EVAP 12	B081	48/12 Fl oz.															
CORNMEAL 5 DEG 8137 10/5 lb. CORNMEAL 8/5 DEG 8138 8/5 lb. CORNMEAL 10 DEG 8141 5/10 lb. CORNMEAL 10 DEG 8142 5/10 lb. CORNMEAL 10 DEG 8144 5/10 lb. CORNMEA	INSTANT 24	B090	6/4 lb.															
CORNMEAL 8/5 DEG 8138 8/5 lb.	EVAP 24	B117	24/12 Fl oz.															
CORNMEAL 8/5 DEG 8138 8/5 lb.																		
CORNMEAL 8/5 DEG 8138 8/5 lb.																		
CORNMEAL 10 DEG	CORNMEAL 5 DEG	B137	10/5 lb.															
CORNMEAL 40 DEG	CORNMEAL 8/5 DEG	B138	8/5 lb.															
FORMULA POWDER 14.1 B158 24/14 oz.	CORNMEAL 10 DEG	B141	5/10 lb.															
FARINA B160 24/14 oz.	CORNMEAL 40 DEG	B142	5/10 lb.															
FARINA B160 24/14 oz.																		
CEREAL INFANT R8	FORMULA POWDER 14.1	B158	24/14 oz.															
CEREAL INFANT R8																		
FORMULA SOY DRY 6/14 B162 6/14 oz.  FORMULA SOY 12 B163 12/13 Fl oz  FORMULA 12 B164 12/13 Fl oz.  FORMULA B165 24/13 Fl oz  FORMULA SOY B166 24/13 Fl oz  FORMULA SOY B166 24/13 Fl oz  FORMULA POWER B167 12/1 lb.  FORMULA POWDER 6 B168 6/1 lb.	FARINA	B160	24/14 oz.															
FORMULA SOY DRY 6/14 B162 6/14 oz.  FORMULA SOY 12 B163 12/13 Fl oz  FORMULA 12 B164 12/13 Fl oz.  FORMULA B165 24/13 Fl oz  FORMULA SOY B166 24/13 Fl oz  FORMULA SOY B166 24/13 Fl oz  FORMULA POWER B167 12/1 lb.  FORMULA POWDER 6 B168 6/1 lb.	CEDEAL INFANT DO	D1 C1	4.0.10												1			
FORMULA SOY 12         B163         12/13 Fl oz         Image: control of the control of th																		
FORMULA 12       B164       12/13 Fl oz.																		
FORMULA         B165         24/13 Fl oz																		
FORMULA SOY         B166         24/13 Fl oz <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>																		
FORMULA POWER         B167         12/1 lb.																		
FORMULA POWDER 6 B168 6/1 lb.	FORMULA POWER	1																
															-			
		1													1			

MONTHLY REPORT OF COMMODITY SUPPLEMENTAL					REPORTING MO	ONTH AND YI	EAR:	STATE A	GENCY NAME:			REPORTING MEARSUREMENT						
FOOD PROGRAM S	TATE	AND LO	CAL INVEN	ITORY						CASES ( ) OR UNITS ( )								
					L		STATE AN	D LOCAL D	ATA			<u>.</u>						
6. COMMODITY NAME	6A.	6B. PACK SIZE	7. STATE & LOCAL	8. RECEIPTS		10. TOTAL INVENTORY	TOTAL	Y ISSUANCE NUMBER ED TO:	TOTAL	MODITY ACTIV		AMT	13. TOTAL ACTIVITY (12A + B	14. ADJUSTMENTS  POSI- NEGA-TIVE TIVE		15. STATE & LOCAL ENDING		
			BEGINNING		IN	AVAILABLE (7+8+9=10)	W-I-C	ELDERLY (B)	NUMBER ISSUED (11A+B=12) (A)	IONS OUT (B)	FOOD LOSS (C)	FOR NUT ED (D)	C + D = 13	(A)	(B)	INVENTORY ((10-13) + OR - 14A & B = 15)		
GRITS CW 5	B381	10/5 lb.							•									
GRITS CW 40	B382	8/5 lb.																
HONEY 24	B403	24/24 oz.																
MACARONI 1	B425	24/1 lb.																
OATS 3	B445													1				
PB 2	B445																	
PB RDU-FAT 2	B470	24/2 lb. 24/2 lb.																
CHUNKY RDU-FAT 2	B488																	
RICE 2	B510	,																
	1																	
	1																	
CEREAL CORN RTE 17.5	B847	14/17.5 o	<u>.</u>															
CEREAL RICE 15	1	12/15 oz.	1															
CEREAL CORN 18		12/18 oz.																
CEREAL CORN 16	B851		<del> </del>			<u> </u>						1		1				
CEREAL CORN 17.5		12/17.5 o												1				
CEREAL OATS 15.5		12/15.5 o	1															

MONTHLY REPORT	MENTAL	REPORTING MO	ONTH AND YEA	AR:	STATE AC	GENCY NAI	ИE:			REPORTING MEARSUREMENT								
FOOD PROGRAM ST	ΓΑΤΕ	AND LO	CAL INVEN	ITORY									CASES ( ) OR UNITS ( )					
						S	TATE AN	D LOCAL D	ATA				•					
6. COMMODITY NAME	6A.	6B. PACK SIZE	7. STATE & LOCAL BEGINNING INVENTORY	8. RECEIPTS	9. REDONATIONS	TOTAL INVENTORY AVAILABLE (7+8+9=10)	TOTAL I ISSUE W-I-C	Y ISSUANCE NUMBER D TO: ELDERLY (B)	TOTAL NUMBER ISSUED (11A+B=	OU.	NAT- NS IT	FOOD LOSS (C)	AMT USED FOR NUT ED (D)	13. TOTAL ACTIVITY (12A +B C + D = 13)	14. ADJUST POSI- TIVE	MENTS  NEGA- TIVE  (B)	15. STATE & LOCAL ENDING INVENTORY ((10-13) + OR - 14A & B = 15)	
CEREAL OATS	B860	24/15 oz							(7 ()	(5)		(0)	1-7					
CEREAL OATS 16	B861	12/16 oz																
CEREAL RICE 12	B866	12/13 oz																
CEREAL RICE 17.5	B867	12/17 oz	1			1												
CEREAL RICE RTE 17.5	B868	14/17.5 o				1												
CEREAL WHEAT 16	B871	12/16 oz.				1												
CEREAL WHEAT RTE 16	B872	14/16 oz																
						1												
						<del>                                     </del>												
						<del>                                     </del>					+							
											+							
16. REMARKS (Provide Ex	planatio	on as Requ	ested by Insti	ructions.) (A	ttach Additional	Sheets as Dee	med Neces	sary.)		•					•			
17. SIGNATURE 18. TITLE				19. DATE	20.	CSFP		OUTLAYS (A)	<b>S</b>	UNLIQ. OBLIGATION (B)			TOTAL (C)	ι	INLIQ. BAL. OF ADVANCES (D)			
					AI	ADMINISTRATION												

## **FNS-153 REPORTING INSTRUCTIONS**

Reporting Measurements - Data reported on ths FNS-153 form can be shown in either "case/remaining" or "units." Reporting data in "cases/remaining units" for some columns and just "units" for other columns or vice versa is prohibited on the same form. Prior FNS approval is required for a State agency to switch one reporting measurement to another. The choice of the measurement "cases/remaining units" or "units" is left to the discretion of the reporting State agency. Rounding the count is unacceptable.

"Cases" means the container size in which the commodity is shipped. For example, the pack size for egg mix is 48/6 oz. foils. If reporting "cases/remaining units," 48 cases and 3 units would be shown on the FNS-153 as "48/3." Any number appearing to the left of the slash will represent the number of cases. In contrast, any number to the right of the slash will represent the actual number of units. When a number appears with no slash, FNS will automatically assume it is whole casses when 5A is checked.

be reported as "48," and 5A would be checked.

Submission - The CSFP State agency shall collect the necessary data for this report from the local certification, State and local warehouse sites within its jurisdiction and combine the data so that only one FNS-153 report would be submitted by the CSFP State agency to the appropriate FNS regional office no later than 30 days after the end of the month being reported for. Financial status data (item 20) shall be completed quarterly and submitted on the FNS-153 for December, March, June, and September. A final closeout SF-269 for CSFP must be submitted to FNS within 90 days after the end of the fiscal year.

- 1. Reporting Month and year Enter month and year for which data is reported.
- 2A &2B. State Agency name & DA Code Self-explanatory.
- 3. Type of Invent/Part Submission Indicate type of submission for month being reported. The initial submission of this report should be such by checking (A). Any subsequent revisions for the report month should be indicated by checking 3(b). The submission of the annual physical inventory which is due for the report month of September should be indicated by checking 3(c). If the September report is submitted with 3(c) checked, FNS will automatically consider it the final report for September.
- 4. Number of Participants (A through E) Enter the toal number of participants by category, to whom commodities were actually issed.
  - 4(F). Self-explanatory.
  - 4(G). Enter the total number of elderly participants to whom commodities were actually issued.
  - 5. (A and B) Reporting Measurement (see above explanation) Check appropriate clock 5A or 5B.
- 6. (A and B) Commodity name, code and shipping pack size Where the code and name of a commodity is not preprinted on this form, enter that information on the next available blank line.
- 7. State and Local Beginning Inventory Enter the number appearing in item 15 in the previous month's report. (This number must reflect all foods physically located at State and local storage and distribtion site(s).
  - 8. Receipts Enter the total number of commodities actually accepted in good condition from USDA

during the reported month. (This column should not reflect commodity movement between State and local agencies.)

- 9. Redonations In Enter the total number of redonated commodities received by the State from another State agency or another USDA program from the CSFP. Specify in the remarks section the name of the State and program those commodities were redonated from and their commodity code.
- 10. Total Inventory Available Enter the total number of commodities available for issuance for the CSFP. (The sum of items 7, 8, and 9 should equal item 10.)
- 11. CSFP Issuance Enter the total number of commodities actually issued to and accepted by participants during the reporting month as specified below. This figure should exclude those commodities not "Unit" means individual cans, boxes, packages, etc., not cases. For example, 1 case of egg mix would accepted by the participant at the time of food pick-up. If a participant has refused a commodity at pick-up. it should not be considered issued.
  - (A) Reflect the total number of commodities that were actually issued and accepted by Women, Infants and Children (W-I-C).
  - (B) Reflect the total number of commodities actually issued and accepted by elderly during the reporting month.
    - 12. Commodity Activity.
    - 12A. Total number issued Self-explanatory (11A + 11B = 12A).
  - 12B. Redonations Out Enter the total number of commodities shipped by the reporting State to another State agency or to another USDA food program. Specify in the remarks section the name of the State and program those commodities were redonated to and their commodity code.
  - 12C. Food Loss Enter the number of commodities that are actual food losses. These would include foods that: (1) after consignee receipt were found to have concealed damaged; (2) were damaged in the warehouse or during transit from the State warehouse to the local sites; (3) were found to be out-ofcondition or unfit for human consumption; or (4) were known to have been stolen or lost due to fraud, misuse or embezzlement. (The reasons for food loss must be detailed in the REMARKS section. Attach additional pages if necessary.)
  - 12D. Food Used for Nutrition Education Enter the number of commodities used for CSFP nutrition education purposes.
    - 13. Total Activity Self-explanatory (sum 12A thru 12D = 13).
  - 14. Inventory Adjustments Enter the actual number of commodities adjusted. A partial list of such adjustments are provided below as examples. (Note: the reasons for adjustments must be detailed in "Remarks," item 16). This column should not reflect the movement of commodities between the State and its local agencies.

## **REPORTING INSTRUCTIONS - CONTINUED**

- (a) A "Positive" Commodity adjustments could be the result of a bookkeeping error or previous inaccurate inventory count. Any commodity still in good condition which was returned to a distribution site by a participant should be reflected as a positive adjustment.
  - (b) A "Negative" Commodity adjustment could be caused by a bookkeeping discrepancy.
- 15. State and Local Ending Inventory Enter the combined total number of CSFP commodities in inventory at the end of the reporting month at all State and local storage and distribution sites (10-13) plus or minus 14A and 14B = 15.
  - 16. Remarks Self-explanatory.
  - 17. Signature Self-explanatory.
  - 18. Title Self-explanatory.
  - 19. Date Self-explanatory.
  - 20. Complete item number 20 for CSFP as follows.
- (a) Outlays Show the administrative outlays for State and local agencies, administrative outlays are contract the cumulative year-to-date payments, or invoices certified by the program for payment, for administrative costs provided incurred through the quarter being reported for. (Do not report advances as outlays.)

- (b) Unliquidated Obligations Show the unliquidated obligations for the State and local agencies. Unliquidated administrative obligations are the cumulative year-to-date dollars which the State agency expects to pay out for administrative cost incurred through the quarter being reported for but not yet paid or certified for payment. (Only obligations to be paid with Federal funds should be shown.)
  - (c) Total Show the sums of (A) and (B).
- (d) Unliquidated Balances of Advances where applicable show the unliquidated balance of advances as of the end of the report quarter. This should be calculated as follows:
- (1) Determine the total amount of payments provided to local agencies and contract agents for administration year-to-date.
- (2) Determine the total amount of outlays made by local agencies and contract agents for administration for the year-to-date.
  - (3) Subtract (2) from (1) and record the result as the unliquidated balances of advances.

Advances for Administration are actual payments made by the State agency to a local agency or contract agent which are not administrative costs already paid or fees for goods/services already provided.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0293. The time required to complete this collection is estimated to average 6.3 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information.