Submission Studio

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Disaster Relief | Disaster Relief 2 | Disaster Relief 3 | Disaster Relief 4

4. Disaster Dates	Disaster Name		

5. Total # of persons receiving commodity, by county

	County/Parish/Judicial Area	Total # Persons
[Delete]		

[Insert Line [Alt-1]]

Total # Persons	

6. Type of Feeding

[⌄]			

7. TYPE OF DISASTER

Presidential Declaration
[⌄]			

Primary Type of Disaster
[⌄]			

Secondary Types of Disaster
☐ Flood	☐ Hurricane	☐ Other (Specify)		
☐ Tornado	☐ Earthquake			

8. Name of agency(s) issuing commodity to recipients

☐ American Red Cross	☐ Salvation Army	☐ Other (Specify Below)	

9. Period of issuance to disaster relief recipients (MM/DD/YYYY)

From:		Through:	

10. Commodities Distributed

	Commodity Code	Commodity Description	D.O. Number (Optional)	# of Cases	Case Weight	Case Value	Total Pounds	Total Value
[Delete]								

[Insert Line [Alt-2]]

Total							

11. Remarks