Documentation Summary Sheet for: <u>Staff Costs</u>

	Who Prepared this Repor	rt	Food Bank ID
Phone or email_			County
 This form Anticipate must cont The eligible The hours Unspent form STAFF COSTS: ADP); OR time	must be returned with red payments are not allowed payments are not allowed to be time period is July 1, a worked must fall after funds must be returned to a Required forms of docards, supported by cop	May 31, 2021. 2020 through May 31, 2021. July 1, 2020. the Regional Food Bank by Ma	han May 31, 2021. It of June to fully expend the grant, you you will start a superior of June to fully expend the grant, you will start a superior of June 10, 2021. In the control of the control of June 10, 2021. In the control of the control of June 10, 2021. In
	l amount of each pay cl	heck issued to this person for the	
PAY DATE	AMOUNT	PAY DATE	E AMOUNT
sub total		TOTAL:	
	ay \$ X	TOTAL:	OS Expenses.

Arrange copies of documents in the order listed above, place the summary form on top and staple everything together.

Return to Kerry Leary at the Regional Food Bank of NENY, 965 Albany Shaker Rd Latham, NY 12110.

2020-2021 Operations Support (OS) Documentation Summary Sheet for: Space Costs

Agency Name				
Name of Person W	ho Prepared th	is Report		Food Bank ID
Phone or email			County	
 This form r Anticipated must contact The eligible Unspent fur SPACE COSTS: 1	nust be returned payments are cert Kerry Leary etime period is not must be referred.	d with required document allowable. If you prior to May 31, 2021 July 1, 2020 through urned to the Regional of bank-canceled research		1, 2021. fully expend the grant, you
	CHECK NUMBER	CHECK DATE	AMOUNT OF CHECK	
		TOTAL		
Total Paid	d \$	X% Space Use	d for Food Service = \$	OS Expenses.
<u>% Spa</u>	ace Used for Fo	=	entage indicated on your sign our application.	ed budget form,

Arrange copies of documents in the order listed above, place the summary form on top and staple everything together.

Return to Kerry Leary at the Regional Food Bank of NENY, 965 Albany Shaker Rd Latham, NY 12110.

2020-2021 Operations Support (OS) Documentation Summary Sheet for: Utility Costs

of Person V	Who Prepared this	Report		Food	l Bank ID _
or email				County	
This form Anticipate must conta The eligib	must be returned of the payments are not carry Leary product Kerry Leary product is June 1 time period is June 1 time 1 tim	with required document allowable. If you rior to May 31, 202 uly 1, 2020 through	May 31, 2021.	an May 31, 20 of June to fully	<u>21.</u>
-		rned to the Regiona curred after July 1,	l Food Bank by May 2020.	31, 2021.	
-	eriod of each utili	itv bill. the amoun	t of each utility bill	and the checl	k number us
the period one utility c	of July 1, 2020 th	rough May 31, 202 an itemized list for		mitting docum	entation for
he billing po the period o one utility c	of July 1, 2020 the ompany, fill out a	rough May 31, 202 an itemized list for	21. If you are substance each company. Utility Company	mitting docum	entation for
he billing po the period o	of July 1, 2020 the ompany, fill out a	rough May 31, 202 an itemized list for	21. If you are sub- reach company.	mitting docum	entation for
he billing po the period o one utility c y company:_ BILLING	of July 1, 2020 the ompany, fill out a	rough May 31, 202 an itemized list for CHECK	21. If you are substreach company. Utility Compan	mitting docum	CHECK
he billing po the period o one utility c y company:_ BILLING	of July 1, 2020 the ompany, fill out a	rough May 31, 202 an itemized list for CHECK	21. If you are substreach company. Utility Compan	mitting docum	CHECK

% Utilities Used for Food Service is the percentage indicated on your signed budget form, taken from your application.

Arrange copies of documents in the order listed above, place the summary form on top and staple everything together.

Return to Kerry Leary at the Regional Food Bank of NENY, 965 Albany Shaker Rd Latham, NY 12110.

Documentation Summary Sheet for: Food Service Paper Products and Other Supplies

Agency Name	
Name of Person Who Prepared this Report	Food Bank ID
Phone or email	County

- Complete this sheet for documenting Food Service Paper Product costs and attach it to the required documentation.
- This form must be returned with required documentation no later than May 31, 2021.
- Anticipated payments are not allowable. If you need the first week of June to fully expend the grant, you must contact Kerry Leary prior to May 31, 2021.
- The eligible time period is July 1, 2020 through May 31, 2021.
- Unspent funds must be returned to the Regional Food Bank by May 31, 2021.

FOOD SERVICE PAPER PRODUCTS AND OTHER SUPPLIES COSTS: Required documentation includes copies of vendor invoices or register receipts <u>with allowable items checked</u> and copies of bank-canceled checks if paid by check.

Invoice Date	Vendor	Check Number	Total charge for OS
			items only
			recins only
			Φ.
			\$

OS Items Include:

- disposable plates, cups
- plastic utensils
- plastic wrap
- aluminum foil
- foil baking/roasting pans
- foil steam table pans
- disposable food containers
- food service gloves
- paper bags, plastic bags, reusable grocery bags used to pack food for food pantry clients
- Thermal blankets
- * Food Pantries may only claim grocery bags for packing pantry bags, food service gloves, as well as thermal blankets

Masks are NOT allowable

Arrange copies of documents in the order listed above, place the summary form on top and staple everything together.

Return to Kerry Leary at the Regional Food Bank of NENY, 965 Albany Shaker Rd Latham, NY 12110.

Documentation Summary Sheet for: Food Service Equipment

Agency Name	_
Name of Person Who Prepared this Report	Food Bank ID
Phone or email	County

- Complete this sheet for documenting Food Service Equipment costs and attach it to the required documentation.
- This form must be returned with required documentation no later than May 31, 2021.
- Anticipated payments are not allowable. If you need the first week of June to fully expend the grant, you must contact Kerry Leary prior to May 31, 2021.
- The eligible time period is July 1, 2020 through May 31, 2021.
- Unspent funds must be returned to the Regional Food Bank by May 31, 2021.

EQUIPMENT COSTS: Required documentation includes a copy of vendor invoice as well as paid receipt or <u>bank-canceled</u> check if paid by check. Please complete the chart below.

NAME OF VENDOR	ITEM	MODEL#	SERIAL#	QUANTITY	COST

Arrange copies of documents in the order listed above, place the summary form on top and staple everything together.

Return to Kerry Leary at the Regional Food Bank of NENY, 965 Albany Shaker Rd Latham, NY 12110.

Documentation Summary Sheet for: <u>Transportation</u>, <u>Option 1: Mileage</u>

Agency Name____

Name of Person Who Prepared this Report	Food Bank ID
Phone or email	County
 This form must be returned with required d 	f you need the first week of June to fully expend the grant, you 2021. ough May 31, 2021.
<u> </u>	You may only be reimbursed for mileage for transportation of Mileage can only be claimed for picking up an <u>order</u> from the livery site.

For Mileage documentation, include a log showing dates, destinations, odometer readings and mileage traveled. The log must be signed by the driver and endorsed by the agency supervisor authorizing the expense. Copies of bank-canceled checks or signed receipts must be provided as proof of payment. (Receipts for tolls may be reimbursed if attached, but not gas receipts.)

Total Miles	X \$ 0.575 Per Mile= \$	Total Mileage
Plus Total of Tolls	= \$	Total Cost for Transportation.

DATE	PAID TO	CHECK #	AMOUNT
		TOTAL	

Arrange copies of documents in the order listed above, place the summary form on top and staple everything together.

Return to Kerry Leary at the Regional Food Bank of NENY, 965 Albany Shaker Rd Latham, NY 12110.

Documentation Summary Sheet for: <u>Transportation, Option 2: Rental Costs</u>

ne of reform vi	Tho Prepared this Report			Foo	d Bank ID
ne or email				County	
 This form in the Anticipated must contain the eligible. Unspent further than the thickness of the thickness	his sheet for documenting Vehicles must be returned with required do a payments are not allowable. If yet Kerry Leary prior to May 31, 20 e time period is July 1, 2020 through the must be returned to the Regionsportation Rental Costs. You reportation of HPNAP food to you	cumentation now you need the fire 021. The graph of the graph of the graph of the graph of the graph of the graph of the graph of the graph of the g	o later than est week of 221. by May 3 embursed	May 31, 20 f June to fully 31, 2021. for rental co	y expend the grant, you
picking up an <u>o</u>	rder from the Food Bank Wareho	ouse and/or a Fo	ood Bank	Delivery site	
	les provide a list of the dates, de pies of paid receipts or <u>bank-ca</u>				receipts, and toll
Rental Date	Destination	RENTAL AMOUNT	GAS	TOLLS	TOTAL FOR EACH TRIP

Arrange copies of documents in the order listed above, place the summary form on top and staple everything together.

Return to Kerry Leary at the Regional Food Bank of NENY, 965 Albany Shaker Rd Latham, NY 12110.