TEFAP – The Emergency Food Assistance Program
USDA Commodity Acceptance Report

This form must be submitted, along with the TEFAP Summary Report, to the Food Bank by the 7th of the month. Failure to submit these forms will jeopardize your next food allocation.

Agency Name:_____

Month/Year:_____ EFO:_____

Qualifier Codes

1 TANIF – Temporary Assistance to Families in need
2 SNAP – Food Stamps
3 SSI Supplemental Security Income
4 WIC Women, Infants and Children
5 MEDICAID
6 Self Declaration – Income eligibility ***6-2023***
7 Disaster

	Date	Printed Name	# Adults	# Children	Q Code	Full address	Zip Code
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
		Total Adults & Children					

- TEFAP foods shall not be sold, exchanged, or otherwise disposed of without the approval of the NJDA.
- Do not request proof of income.

This institution is an equal opportunity provider.

NEW JERSEY DEPARTMENT OF AGRICULTURE