



The Idaho Foodbank

COMMODITY SUPPLEMENTAL FOOD PROGRAM (CSFP) Physical Inventory Form

For More Information Contact:
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Email: CSFP@idahofoodbank.org

DATE: _____/_____/_____

DISTRIBUTING AGENCY: _____

ADDRESS OF CSFP STORAGE FACILITY: _____

a.) Number of CSFP boxes in inventory	b.) Number of CSFP Cheese blocks in inventory	c.) Number of damaged and unusable CSFP boxes

I accept full responsibility for providing proper accountability, handling, storage, and utilization of the contract-related CSFP boxes. (7 CFR Part §247. 28) (7 CFR Part §250.13,14)

- Receive instructions on the distribution of CSFP boxes from The Idaho Foodbank. The Distribution Partner must distribute the CSFP boxes in accordance with these instructions.
- Promptly respond to any shortage, losses, or damages at all times that such CSFP boxes are in their possession, as per the instructions given by The Idaho Foodbank.
- Keep and distribute CSFP boxes **intact and unopened**. All United States Department of Agriculture (USDA) and/or state purchased food commodities are to be distributed uncut and in the original packaging as received from The Idaho Foodbank, unless prior instructions are received from The Idaho Foodbank.
- Not misrepresent CSFP food as another USDA commodity program. (Title 7 CFR part §251.10 (f)(i))
- Ensure unused CSFP boxes at the end of the month remain with the Distribution Partner. From the monthly CSFP Usage Report the Contractor shall reduce the number of CSFP boxes sent to the Distribution Partner equal to the number for boxes on hand reported by the Distribution Partner.
- Accept responsibility for ensuring that the CSFP boxes are sufficiently insured or that a “method” and “means” for the replacement cost of CSFP boxes is identified and utilized if necessary.
- Use the First In /First Out (FIFO) process to ensure CSFP boxes are utilized in a timely manner.

By signing I do hereby verify the CSFP inventory, for which I am responsible, is accurate and up to date.

SIGNATURE: _____

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