



TEFAP Annual Training

Manuela Kirmse

Fiscal Year 2027

Vocab



ERA (Eligible Recipient Agency)

An organization that helps provide food to people in need through programs like food pantries, soup kitchens, senior meals, summer meals, or disaster relief. It must:

- Be public or nonprofit
- Have a written agreement to receive USDA food
- Not be a prison

Sub-ERA (Sub-Eligible Recipient Agency)

An organization that works with an ERA to help distribute USDA food. It must:

- Be public or nonprofit
- Have a written agreement with an ERA
- Not be a prison

USDA (United States Department of Agriculture)

A U.S. government agency that manages farming, food programs, and rural development.

CDSS (California Department of Social Services)

A California state agency that runs programs to help with food, child welfare, and community care.

Beneficiary

A person or group who receives help, like food, money, or services, from a program or organization.

Vocab



TEFAP (The Emergency Food Assistance Program)

A U.S. program that gives free food to low-income people through food banks and pantries.

Intermediary

A person or group that helps connect or manage communication between two other parties.

FIFO (First In, First Out)

A system for using the oldest items in storage first. It helps keep food fresh and avoid waste.

Food Bank

A large nonprofit that collects and stores food, then gives it to smaller groups like food pantries and soup kitchens.

Food Pantry

A local place that gives free groceries directly to people and families in need

UEI # (Unique Entity Identifier Number)

A special number given by the federal government to identify a business or nonprofit for official use.

Vocab



501(c)(3)

A type of nonprofit organization that doesn't pay federal taxes and can receive tax-deductible donations. It must serve the public good (like charities or schools).

COI (Certificate of Insurance)

A document that proves an organization has insurance and shows what the policy covers.

EIN (Employer Identification Number)

A number given by the IRS to businesses and nonprofits to identify them for tax reasons.

Invoice

A document sent to a partner site showing what food/products they will receive. It is sent 2 business days before delivery.

MOU (Memorandum of Understanding)

A written agreement between two or more groups that shows they plan to work together. It's not a legal contract, but it shows serious intent.

SFHC (Safe Food Handling Certification)

A certificate showing that someone has been trained in safe ways to handle and serve food.

What is TEFAP?

TEFAP (The Emergency Food Assistance Program) is a U.S. government program that provides free food to individuals and families experiencing food insecurity.

Through the program, the USDA purchases American-grown foods directly from U.S. farmers and producers, helping support domestic agriculture while covering the cost of the food.

These foods are then distributed at no cost to food banks, pantries, and community organizations across the country, ensuring nutritious food reaches people in need while also strengthening and supporting American farmers.



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SECOND
HARVEST
FOOD
BANK
ORANGE COUNTY

TEFAP

01

Farms

The USDA purchases fresh, American-grown foods directly from U.S. farmers and producers, including fruits, vegetables, dairy, grains, and proteins.



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FOOD
BANK
ORANGE COUNTY

TEFAP

02

1

States

Each state works with the USDA to request and receive TEFAP foods. States are responsible for overseeing how food is distributed fairly and efficiently within their communities.



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FOOD
BANK
ORANGE COUNTY

TEFAP

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03

Food Banks

Food banks receive TEFAP foods from their state and help move those foods into local communities. They partner with pantries, shelters, soup kitchens, to ensure food reaches people who need it most.



3



TEFAP

4

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04

Families

Millions of individuals and families rely on TEFAP foods each year. The program helps children access nutritious meals, supports seniors, and assists families facing difficult times by providing food at no cost.



SECOND
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FOOD
BANK
ORANGE COUNTY

TEFAP

4

Food must be in climate-controlled conditions

Food must be stored in a space that can be locked

All cold storage units must have temperature logs for the days of distribution. Keep for 6-months

Food must be 6 inches away from the wall and be off the floor when not palletized

Storing TEFAP commodities

Food must be stored separately from non-TEFAP items

Food must be stored away from non-food items

Pest prevention in place

FIFO

Guidelines

TEFAP

Guidelines



Guidelines

TEFAP

Must be open
to the public

- Cannot limit participation
- Cannot be a “Closed Site”

Must
distribute at
least 1 time
per month

- Can distribute more frequently
- Minimally 1x per month

Guidelines

TEFAP

Distribution information must be accurate and available to the public

- Update our website monthly
- Update CDSS with any changes
- Display QR code

Must distribute according to the communicated time

- Someone must be on site during the entire advertised time
- Cannot distribute food early/ before distribution

Guidelines

TEFAP

Cannot have
donation bins/
boxes/ cans
displayed

- Clients cannot feel pressured to donate or reciprocate anything to receive food

Clients cannot be
pressured or
influenced to support
any religious or
political view

- Distribution may not display any political or religious advertisement during a TEFAP distribution
- Items can be displayed after food is received

Guidelines

TEFAP

Pest prevention

- Partner must have monthly preventative pest services, from an outside company
- Any pest sighting (dead or alive) must be immediately reported to SHFBOC

FIFO / FEFO

- Partner must have a process to determine the safety of their food and to navigate the rotation of their product

Distributing Product

TEFAP

Distribution of Product



Distributing Product

TEFAP

All items must
be stored and
distributed
separately

- They may be distributed at the same time as other food, however, must be clearly separated and labeled as TEFAP

Review
Invoices

- Please know all food will be send together and wrapped together on the same pallet, it's very important that we are reviewing the invoice, so we are separating the TEFAP food

Distributing Product

TEFAP

Item No.	Description	Pack Size	Storage	Qty.
14577	Salsa (DON)	6/16oz	REF	17
15548	Yogurt (DON)	48/4oz	REF	9
15394	Oranges (LFPA)	25lbs banana box	REF	15
14455	Onions (FARMTOFAM)	50lb bag	REF	6
15102	Zucchini (HSFARM)	25lb crate	REF	16
15447	Potatoes (FARMTOFAM)	50lb case	REF	6
15519	Eggplant (HSFARM)	13lb crate	REF	10
15450	Peach Fruit Cups (DON)	96/4.4oz	FROZEN	5
14566	Cereal (DON)	38oz	DRY	100
15091	Donuts (DON)	8-4/0.82oz	DRY	13
15441	Potato Chips (DON)	20/6oz	DRY	10
15468	Green Beans (DON)	24/14.5oz	DRY	5
15469	Pinto Beans (DON)	12/15oz	DRY	9
15354	Dried Cherries, 100298 (EFAP)	8/32oz	DRY	8
13844	Apple Juice, 100893 (EFAP)	8/64 oz	DRY	9
13556	Peanut Butter, 111081	12/16oz	DRY	6
15527	Strawberries, 111120 (EFAP)	12/2.5oz	FROZEN	6



Distributing Product

TEFAP

All food must be distributed in a way that can guarantee all clients have access to all the items

- If client choice, all items must be displayed at once, all clients need to have access to each TEFAP item available
- If prebagged/ boxed, all items need to be included



Distributing Product

TEFAP

Golden Rule

- If a TEFAP item is donated back to the food pantry that item is no longer considered TEFAP
- Freebee table/ return table
 - Must be clear that it is optional to return the TEFAP items or use the freebee/ return table

Distributing Product

TEFAP

All required signate must be posted

- Income Guidelines
- Notice of Beneficiary Rights
- QR Code –with all TEFAP distributions in OC
- And Justice For All Poster
- TEFAP Distribution days and times



Distributing Product

TEFAP

California Health & Human Services Agency

California Department of Social Services

THE EMERGENCY FOOD ASSISTANCE PROGRAM (TEFAP)
2025 INCOME GUIDELINES
EL PROGRAMA DE ASISTENCIA ALIMENTARIA DE EMERGENCIA (TEFAP)
GUÍA DE INGRESOS PARA EL 2025

MAXIMUM INCOME / MÁXIMO DE INGRESOS		
HOUSEHOLD SIZE TAMAÑO DEL HOGAR	MONTHLY HOUSEHOLD INCOME INGRESOS MENSUALES DEL HOGAR	ANNUAL HOUSEHOLD INCOME INGRESOS ANUALES DEL HOGAR
1	\$3,064.79	\$36,777.50
2	\$4,141.88	\$49,702.50
3	\$5,218.96	\$62,627.50
4	\$6,296.04	\$75,552.50
5	\$7,373.13	\$88,477.50
6	\$8,450.21	\$101,402.50
7	\$9,527.29	\$114,327.50
8	\$10,604.38	\$127,252.50
Over 8 Más de 8 personas	Add \$1,077.09 each Añada \$1,077.09 por cada persona	Add \$12,925.00 each Añada \$12,925.00 por cada persona

*This institution is an equal opportunity provider.
Esta institución ofrece igualdad de oportunidades.*

Income Guidelines – EFA 14

- Clients must self attest their income prior to completing the EFA-7
- To allow clients to self attest their income, the EFA-14 must be posted next to the EFA-7 document
- Both pages must be displayed



Distributing Product

TEFAP

Written Notice of Beneficiary Rights The Emergency Food Assistance Program (TEFAP)



Name of Organization:

Contact Information for Program Staff:

Name:

Phone Number:

Email Address:

Because TEFAP is supported in whole or in part by financial assistance from the Federal Government, we are required to let you know that—

- We may not discriminate against you on the basis of religion or religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice;
- We may not require you to attend or participate in any explicitly religious activities that are offered by us, and any participation by you in these activities must be purely voluntary;
- We must separate in time or location any privately funded explicitly religious activities from activities supported with USDA direct assistance;
- If you object to the religious character of our organization, we must make reasonable efforts to identify and refer you to an alternate provider to which you have no objection. We cannot guarantee, however, that in every instance, an alternate provider will be available; and
- You may report violations of these protections (including denials of services or benefits) by an organization to the State agency (<http://www.fns.usda.gov/fdd/food-distribution-contacts>). The State agency will respond to the complaint and report the alleged violations to their respective USDA FNS Regional Office (<http://www.fns.usda.gov/fns-regional-offices>).

We must provide you with this written notice before you enroll in TEFAP or receive services from TEFAP, as required by 7 CFR part 16. Alternate Service Location(s) or State Agency Contact Information:

Name of Organization:

Second Harvest Food Bank of Orange County

Phone Number:

949-653-2900

Email Address:

manuela@feedoc.org

Notice of Beneficiary Rights

- States that no organization may discriminate on the base of religion or religious beliefs.
- Cannot require participation in any religious activities
- Must separate religious activities from their TEFAP distribution
- Must make reasonable efforts to refer clients to an alternate location.



Distributing Product

TEFAP

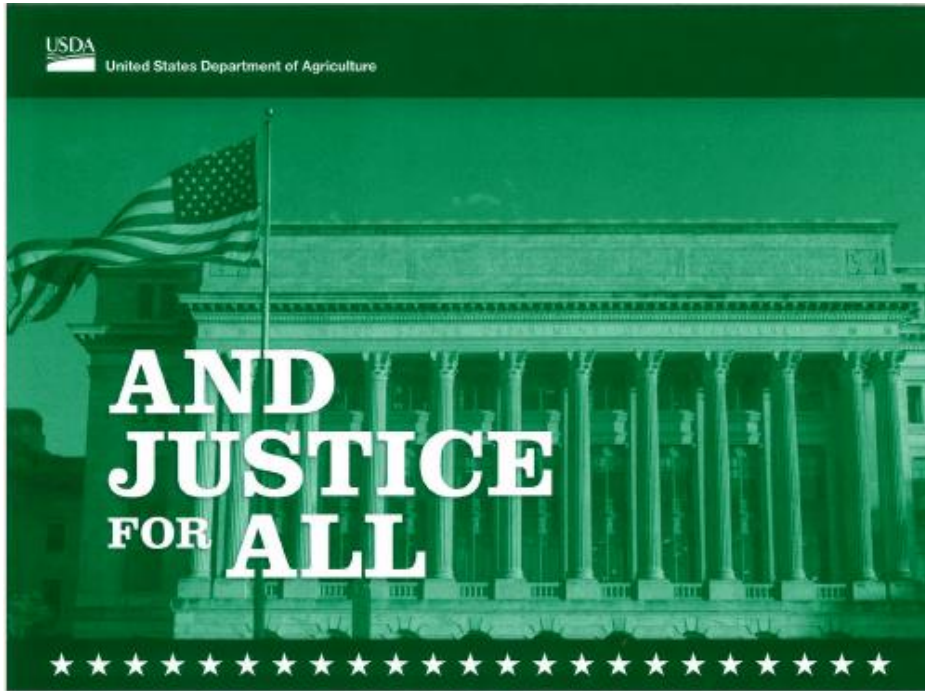


QR Code –with all TEFAP distributions in OC

- Distribution information for all TEFAP sites must be available to the public
- Clients must be referred to other locations if they do not want to receive food at your location

Distributing Product

TEFAP



In accordance with Federal law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, disability, and reprisal or retaliation for prior civil rights activity. (Not all prohibited bases apply to all programs.)

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, and American Sign Language) should contact the responsible State or local Agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form, which can be obtained online, at <https://www.ocio.usda.gov/document/ad-3027>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant

Conforme a la ley federal y las políticas y regulaciones de derechos civiles del Departamento de Agricultura de los Estados Unidos (USDA), esta institución tiene prohibido discriminar por motivos de raza, color, origen nacional, sexo, edad, discapacidad, venganza o represalia por actividades realizadas en el pasado relacionadas con los derechos civiles. (No todos los principios de prohibición aplican a todos los programas).

La información del programa puede estar disponible en otros idiomas además del inglés. Las personas con discapacidades que requieran medios de comunicación alternativos para obtener información sobre el programa (por ejemplo, Braille, letra agrandada, grabación de audio y lenguaje de señas americano) deben comunicarse con la agencia estatal o local responsable que administra el programa o con el TARGET Center del USDA al (202) 720-2600 (voz y TTY) o comunicarse con el USDA a través del Servicio Federal de Transmisión de Información al (800) 877-8339.

Para presentar una queja por discriminación en el programa, el reclamante debe completar un formulario AD-3027, Formulario de queja por discriminación del programa del USDA, que se puede obtener en línea, en <https://www.ocio.usda.gov/document/ad-3027>, en cualquier oficina del USDA, llamando al (866) 632-9992, o escribiendo una carta dirigida al USDA. La carta debe contener el nombre, la dirección y el número de teléfono del reclamante, y una descripción escrita de la supuesta acción discriminatoria con

And Justice for All Poster

- The poster states that all programs funded by the USDA must be conducted without discrimination
- USDA prohibits discrimination in all its programs and activities based on race, color, national origin, sex, age, or disability
- Individuals who are non-English speakers or have limited English proficiency can receive assistance
- Instructions on how to file a discrimination complaint
- Information about reasonable accommodations for individuals with disabilities is also included
- This poster is required to be displayed in locations receiving USDA assistance to ensure that everyone is aware of their rights and how to report any violations



Distributing Product

TEFAP

Food Distribution Inc.

1234 Pleasant Ville, CA

8:30-10:30 M-F

(714)555-5555

Distribution Schedule

- Distribution site name
- Address
- Beginning and end times of the distribution
- Contact telephone number

Distributing Product

TEFAP

How to post signage for drive throughs/ ups?

- Have a sign at the entrance of your drive through with all the required documents
- Hand poster of all signs to client while they are in their vehicle, so they have access to view all the documents
- Have another sign posted where the food is being staged

Distributing Product

TEFAP

TEFAP sites may NOT ask for proof of ID

- Any site that distributes TEFAP may not ask clients to present:
 - ID
 - Income
 - Proof of residence
 - Proof of status

Distributing Product

TEFAP

Volunteers and TEFAP

- Site must guarantee equitable access to TEFAP product
- If a volunteer is in need they must participate in the program like any other client

Distributing Product

TEFAP

Recalls

- A food recall is action taken to remove a food item because it may possess a safety risk
- Please be aware that recalls can happen
- Please begin to prep an internal procedure to handle if there is a recall on food items.
 - Have a way to communicate the recall to your clients.
 - This can be for TEFAP products or any other products. It is essential to be prepared.

Distributing Product

TEFAP

Participating in multiple programs

- Making sure we are collecting household data for all the programs your organization is participating in
 - Recurring Delivery
 - *Children, Adults and Seniors*
 - GR
 - *Pounds*
 - Meals
 - *How many meals were served*



Distributing Product

TEFAP

Redistribution Addendum

- Partners who may have surplus on rare occasions are welcomed to request a Redistribution Addendum Agreement
 - The Agreement will connect you with a nearby partner that can support on those rare occasions your organization may have leftovers
- The addendum does not apply for TEFAP
- **TEFAP must stay on your premises**



Distributing Product

TEFAP

Home Delivery Program

- Any partner who provides home deliveries must:
 - Complete an application
 - Receive approval from SHFBOC
 - Receive a training from SHFBOC
- **May not use TEFAP for home deliveries**

Required Documents

TEFAP

Required Documents



Required Documents

TEFAP

UEI

- As of May 13th organizations no longer need to obtain a UEI to receive federal assistance

THE EMERGENCY FOOD ASSISTANCE PROGRAM (TEFAP)
CERTIFICATION OF ELIGIBILITY

Food Distribution Agency Name:	
Food For Love	
Distribution Date & Time:	Contact Name:
August 2nd 10 - 11	Manuela
Distribution Site Address:	Contact Phone:
1234 Jolly Lane, Happy City, USA	714 - 555 - 5555

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity. (Not all prohibited bases apply to all programs.)

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, and American Sign Language) should contact the responsible State or local Agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form, which can be obtained online, at <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf> from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

Mail:

U.S. Department of Agriculture
Office of the Assistance Secretary for Civil Rights
1400 Independence Avenue
SW Washington, D.C. 20250-9410

Fax:

(833) 256-1665 or (202) 690-7442

Email:

program.intake@usda.gov

This institution is an equal opportunity provider.

EFA-7
(Client
Sign in)

You self-declare that:

1. Your name, county of residence, and zip code listed is correct.
2. Your household size as stated and resides within this state and organization's service area.
3. Your income is within 235% of the Federal Poverty Guidelines as posted for this distribution.
4. You agree that TEFAP food is for home consumption only and will not be sold, traded, or bartered.
5. You have been shown and have read the full USDA Nondiscrimination Statement.

You will not be denied TEFAP food if you refuse to disclose any information that is not a requirement of TEFAP. You are *never* required to provide personal identification documents including, but not exclusive to, an identification card, social security number, or proof of income.

Print Name (Clients)	County of Residence and Zip Code	Family Size	Is this your 1st time receiving USDA food this month?	
1. Molly	OC	3	☒ Yes	☐ No
2. Jack	OC	2	☐ Yes	☒ No
3. Jack for Mary	OC	4	☒ Yes	☐ No
4. Stefanie	OC	7	☐ Yes	☒ No
5.			☐ Yes	☐ No
6.			☐ Yes	☐ No
7.			☐ Yes	☐ No
8.			☐ Yes	☐ No
9.			☐ Yes	☐ No
10.			☐ Yes	☐ No
11.			☐ Yes	☐ No
12.			☐ Yes	☐ No
13.			☐ Yes	☐ No
14.			☐ Yes	☐ No
15.			☐ Yes	☐ No
16.			☐ Yes	☐ No
17.			☐ Yes	☐ No
18.			☐ Yes	☐ No
19.			☐ Yes	☐ No
20.			☐ Yes	☐ No
Total the responses from the last three columns into the last row. i.e. total family size, how many "Yes", how many "No"			2 / 7	2 / 9

Food Bank Name: Second Harvest Food Bank

Required Documents

TEFAP

EFA-7 (Client Sign in)

Correct Usage

- A staff member or volunteer must be present while clients complete the form
- One EFA-7 form must be completed per distribution
 - Using the cover page for each distribution
- Form must be completed at the time of distribution while the client is present, clients are self-attesting their income
- Clients must provide:
 - Name (or "Volunteer Name by proxy")
 - County of residence only
 - Family size
 - Whether it's their first time receiving USDA food that month
- If a client does not want to disclose name or county, use:
 - Name: e.g., "Manuela by proxy"
 - County of Residence: Orange County
- Do not require ID or proof of income
- Encourage clients to provide info, but do not pressure if they appear uncomfortable
- The form may be completed digitally (fillable PDF on tablet, computer, or phone)
- Form may not be altered in any way
- **Most up to date form must be used**



Required Documents

TEFAP

EFA-7 (Client Sign in)

Storage & Compliance Expectations

- Each distribution must include:
 - EFA-7 form
 - Cover sheet
 - Client sign-in sheet
- Completed forms must be stored:
 - For 4 years
 - In a secure, accessible location (for audit purposes)
 - Not in a private residence
 - Not in a location accessible to the general public
 - Failure to produce 4 years of records will result in an automatic noncompliance
- The form cannot be altered, use the official version only, use most updated version
- Forms may also be stored digitally



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(Client
Sign in)

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2. Your household size as stated and resides within this state and organization's service area.
3. Your income is within 235% of the Federal Poverty Guidelines as posted for this distribution.
4. You agree that TEFAP food is for home consumption only and will not be sold, traded, or bartered.
5. You have been shown and have read the full USDA Nondiscrimination Statement.

You will not be denied TEFAP food if you refuse to disclose any information that is not a requirement of TEFAP. You are *never* required to provide personal identification documents including, but not exclusive to, an identification card, social security number, or proof of income.

Print Name (Clients)	County of Residence and Zip Code	Family Size	Is this your 1st time receiving USDA food this month?	
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2. Jack	OC	2	☐ Yes	☒ No
3. Jack for Mary	OC	4	☒ Yes	☐ No
4. Stefanie	OC	7	☐ Yes	☒ No
5.			☐ Yes	☐ No
6.			☐ Yes	☐ No
7.			☐ Yes	☐ No
8.			☐ Yes	☐ No
9.			☐ Yes	☐ No
10.			☐ Yes	☐ No
11.			☐ Yes	☐ No
12.			☐ Yes	☐ No
13.			☐ Yes	☐ No
14.			☐ Yes	☐ No
15.			☐ Yes	☐ No
16.			☐ Yes	☐ No
17.			☐ Yes	☐ No
18.			☐ Yes	☐ No
19.			☐ Yes	☐ No
20.			☐ Yes	☐ No
Total the responses from the last three columns into the last row. i.e. total family size, how many "Yes", how many "No"			2 / 7	2 / 9

Food Bank Name: Second Harvest Food Bank

Required Documents

TEFAP

ALTERNATIVE PICK-UP REQUEST FORM
THE EMERGENCY FOOD ASSISTANCE PROGRAM (TEFAP) 2025 INCOME GUIDELINES

Date: _____

TEFAP MAXIMUM INCOME		
HOUSEHOLD SIZE	MONTHLY HOUSEHOLD INCOME	ANNUAL HOUSEHOLD INCOME
1	\$3,064.79	\$36,777.50
2	\$4,141.88	\$49,702.50
3	\$5,218.96	\$62,627.50
4	\$6,296.04	\$75,552.50
5	\$7,373.13	\$88,477.50
6	\$8,450.21	\$101,402.50
7	\$9,527.29	\$114,327.50
8	\$10,604.38	\$127,252.50
Over 8	Add \$1,077.09 each	Add \$12,925.00 each

Authorization:
I hereby authorize, _____ to pick up my United States Department of Agriculture the Emergency Food Assistance Program (TEFAP) commodities as I am unable to do so.

Certification:
I certify under penalty of perjury that my household income for the past 30 days does not exceed the TEFAP monthly guidelines, or for the past twelve months does not exceed the annual guidelines and that the number listed for my household size is true and correct. Commodities are for my personal home use, not to be sold, traded, or given away.

Signature _____		
County of Residence _____	Zip Code _____	Number of people in household _____

This institution is an equal opportunity provider.

Authorization:
I hereby authorize, **Jack Smith** to pick up my United States Department of Agriculture the Emergency Food Assistance Program (TEFAP) commodities as I am unable to do so.

Certification:
I certify under penalty of perjury that my household income for the past 30 days does not exceed the TEFAP monthly guidelines, or for the past twelve months does not exceed the annual guidelines and that the number listed for my household size is true and correct. Commodities are for my personal home use, not to be sold, traded, or given away.

Mary R.

Signature _____		
County of Residence OC	Zip Code 92782	Number of people in household 4

This institution is an equal opportunity provider.



Required Documents

TEFAP

Alternative Pick-up Request Form

Correct Usage

- Form must be used when someone is picking up on the behalf of someone else
- **Most up to date form must be used**
- The form must be stored for 1 year and must be renewed yearly
 - Site is expected to have a method to track the expiration of the form and the to track who is able to pick up for who
- Form must be stored safely and away from the general public
- The information on the form must be added to the EFA-7
 - If Jack is picking up for Mary, Jack can also receive food if he is need, however Jack must sign for Mary on the EFA – 7
 - Must write: **Jack for Mary** and include Mary's household size and if she has gotten TEFAP food this month
 - If the person's name is hard to read, ask before accepting the form and v the side



Required Documents

TEFAP

ALTERNATIVE PICK-UP REQUEST FORM
THE EMERGENCY FOOD ASSISTANCE PROGRAM (TEFAP) 2025 INCOME GUIDELINES

Date: _____

TEFAP MAXIMUM INCOME		
HOUSEHOLD SIZE	MONTHLY HOUSEHOLD INCOME	ANNUAL HOUSEHOLD INCOME
1	\$3,064.79	\$36,777.50
2	\$4,141.88	\$49,702.50
3	\$5,218.96	\$62,627.50
4	\$6,296.04	\$75,552.50
5	\$7,373.13	\$88,477.50
6	\$8,450.21	\$101,402.50
7	\$9,527.29	\$114,327.50
8	\$10,604.38	\$127,252.50
Over 8	Add \$1,077.09 each	Add \$12,925.00 each

Authorization:
I hereby authorize, _____ to pick up my United States Department of Agriculture the Emergency Food Assistance Program (TEFAP) commodities as I am unable to do so.

Certification:
I certify under penalty of perjury that my household income for the past 30 days does not exceed the TEFAP monthly guidelines, or for the past twelve months does not exceed the annual guidelines and that the number listed for my household size is true and correct. Commodities are for my personal home use, not to be sold, traded, or given away.

Signature _____		
County of Residence _____	Zip Code _____	Number of people in household _____

This institution is an equal opportunity provider.

Authorization:
I hereby authorize, **Jack Smith** to pick up my United States Department of Agriculture the Emergency Food Assistance Program (TEFAP) commodities as I am unable to do so.

Certification:
I certify under penalty of perjury that my household income for the past 30 days does not exceed the TEFAP monthly guidelines, or for the past twelve months does not exceed the annual guidelines and that the number listed for my household size is true and correct. Commodities are for my personal home use, not to be sold, traded, or given away.

Mary R.

Signature _____		
County of Residence OC	Zip Code 92782	Number of people in household 4

This institution is an equal opportunity provider.



Required Documents

TEFAP

Civil Rights Training

Level 2

- All primary and secondary contacts need to be trained in Civil Rights, the training will be Level 2 which consist of a PowerPoint and a check list
- The training needs to be completed each year
- We need to receive copies of the trainings for both primary and secondary contacts

Level 1

- All volunteers/ staff who work directly with TEFAP and or clients, needs to take Level 1 training, this consists of reading the check list and initialing next to each section
- These trainings need to be saved and redone each year

<https://acrobat.adobe.com/id/urn:aaid:sc:US:19bea0a8-3d9f-46b5-8da7-d3f481185860>



Statistical Reporting

TEFAP

Statistical Reporting



Statistical Reporting

TEFAP

Statistics are due the 1st of each month for the previous month

Report the number of unduplicated households and duplicated households

Report number of unduplicated individuals and duplicated individuals

Submit to the link provided



Statistical Reporting

TEFAP

Reporting is due 1st of each month, one report for the entire month

Households		Individuals		Unduplicated		Duplicated	
19.			☐ Yes	☐ No		☐ Yes	☐ No
20.			☐ Yes	☐ No		☐ Yes	☐ No
Total the responses from the last three columns into the last row. i.e. total family size, how many "Yes", how many "No"							

Statistical Reporting

TEFAP

Print Name (Clients)	County of Residence and Zip Code	Family Size	Is this your 1st time receiving USDA food this month?	
1. Molly	OC	3	☒ Yes	☐ No
2. Jack	OC	2	☐ Yes	☒ No
3. Jack for Mary	OC	4	☒ Yes	☐ No
4. Stefanie	OC	7	☐ Yes	☒ No
5.			☐ Yes	☐ No
6.			☐ Yes	☐ No
7.			☐ Yes	☐ No
8.			☐ Yes	☐ No
9.			☐ Yes	☐ No
10.			☐ Yes	☐ No
11.			☐ Yes	☐ No
12.			☐ Yes	☐ No
13.			☐ Yes	☐ No
14.			☐ Yes	☐ No
15.			☐ Yes	☐ No
16.			☐ Yes	☐ No
17.			☐ Yes	☐ No
18.			☐ Yes	☐ No
19.			☐ Yes	☐ No
20.			☐ Yes	☐ No
Total the responses from the last three columns into the last row. i.e. total family size, how many "Yes", how many "No"			2 / 7	2 / 9

Unduplicated Households: 2
Unduplicated Individuals: 7

Duplicated Households: 2
Duplicated Individuals: 9



Statistical Reporting

TEFAP

Unduplicated Households: 2

Unduplicated Individuals: 7

Duplicated Households: 2

Duplicated Individuals: 9

Total the responses from the last three columns into the last row. i.e. total family size, how many "Yes", how many "No"	2	7	2	9
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Food Bank Name: Second Harvest Food Bank

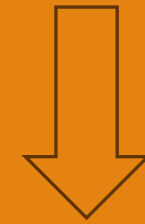




Community Insights On link2feed

Community Insights

is an initiative focused on better understanding the needs of the community and gaps in service by using



Link2Feed

A free, internet browser based, software that provides easy check-in for partners and allows the community more control over their time and information

Benefits

Electronic EFA-7 sign in (TEFAP)

Digitize and automate reporting

No more paperwork

Free, user-friendly, and quick

Client self-registration and appointment management

Data security and aggregated data

Demo





Interested?

Next Steps

Review and fill out the
by using the below link
or scanning the QR code!



Or email the Community
Insights Manager,
Madison:
madison@feedoc.org



Updates

TEFAP

- EFA – 7 can be completed digitally, form can be saved electronically or physically
- EFA – 7 Form cannot be altered and most up to date version must be used
- TEFAP may not be delivered to a client's home, and TEFAP may not be redistributed
- **Translated docs ☺**
 - **Spanish, Vietnamese, Korean**
- Confidentiality
 - Cannot ask for ID, if clients show you their ID please let them know that there is no need to show it
 - Only ask for County of Residence
 - **Do not collect full address**
- Forms must be saved in a secure environment – EFA 7 and EFA 15
 - Cannot be in partner's homes
 - Cannot be easily accessible to members of the community
 - Must be available for SHFB to view during compliance visits

