

Hurricane Satellite Shelter Deliver Receipt

School Host Site: Shelter Name:		
Meal Type (check one)		
<u>Kitchen Supervisor / Staff</u> Number of Meals Produced/Shipped (carefully ch	eck and count meals)
Food Item	Temperature	Quantity
Milk: White Chocolate Strawberry		
Vegetable:		
Fruit:		
Grain:		
Meat:		
Other:		
Total Number of Meals Shipped		
Host Manager Signature:		
Date: Time:		
Shelter Supervisor / Staff Number of Meals Received (carefully check and co	ount meals)	
Food Item	Temperature	Quantity
Milk:		
Vegetable:		
E 1		
Fruit:		
Grain:		
Grain: Meat:		
Grain: Meat: Other:		
Grain: Meat:		
Grain: Meat: Other:		
Grain: Meat: Other: Total Number of Meals Received		
Grain: Meat: Other: Total Number of Meals Received Site Supervisor Signature: Date: Time:		
Grain: Meat: Other: Total Number of Meals Received Site Supervisor Signature: Date: Time:		
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Form No.: FNS-2324-022 – Hurricane Satellite Shelter Delivery Receipt / Food & Nutrition New Date: 9/8/23