

# Partner Agency Monthly Statistics Reporting

Created: 2/24/21





# Reporting Procedure and Requirements

- Agency Partners **must complete a separate** form for **EACH** of their qualifying programs **by the 5th of the following month**.
- If an agency partner falls behind on reporting, your Agency Express account may be blocked. Please reach out to your Agency Representative if you need assistance or extra time to complete your submissions.

## Who should use this form?

- Partner agencies and their non-SHFB funded programs

## Who should NOT use this form?

- If you have a Kid's Cafe program or a SHFB-funded School Pantry program, please continue to report through your existing platforms:
  - a. Second Harvest Kids Cafes Enrollment Data - Assigned Google Sheets
  - b. [Second Harvest Foodbank School Pantry Reporting Form](#)



# Instructions for Use

1. Navigate to the [Household Reporting Form](#) via direct link or through the Second Harvest website:
  - a. Partner Resources > Report Statistics > Report Monthly Program Statistics

## REPORT STATISTICS

So what does it take to end hunger? How will we know when we get there? And how close are we now?

We need hard data to draw down more resources to help folks struggling to make ends meet. This is essential information used to gain a real-time understanding of the numbers of people being helped, and the actual pounds of food being acquired to serve them.

**Report Monthly Program Statistics** 

*Due the 5th of the month*

# Instructions for Use



2. Identify your 5 digit program number (5 digit number after "0160p" used to login to Agency Express
3. Enter 5 digit program number in the first field of the form "Program Number"
4. Press "Auto Complete Program Fields" button
  - a. If program number is incorrect, it will not allow you to proceed.

## Household Reporting

If you have multiple programs under your agency group, you must submit an individual form for each program. You will have an option to submit an additional form upon submission.

**You will need to enter your program number correctly to submit this form.**

- Enter your 5 digit program number and press the "Auto Complete Program Fields" button to autofill in your program information.

Program Number \*

Auto Complete Program Fields

A diagram illustrating the form layout. It shows a text input field labeled "Program Number \*" with a red arrow labeled "3" pointing to it. Below the input field is a button labeled "Auto Complete Program Fields" with a red arrow labeled "4" pointing to it.

# Instructions for Use

4b. If you enter program number correctly, the form will autofill your Program Name, Agency Rep, City, County and Program Type.

4c. If you do not know your program number, please reach out to your Agency Representative or [orders@shfbmadison.org](mailto:orders@shfbmadison.org).

4d. Review the autofill information for accuracy. If something is not correct - you may override manually with the correct information. Reach out to [kristam@shfbmadison.org](mailto:kristam@shfbmadison.org) if there is inaccurate information in your autofill fields.



Program Number \*

111111

Auto Complete Program Fields

Fields have been auto filled.

Program Name \*

Second Harvest Test Account

Agency Rep \*

KRISTA

City \*

Madison

County \*

DANE

Program Type \*

- Food Pantry
- MEAL SITE
- BACKPACK

# Instructions for Use

5. Based on your Program Type, select questions will be visible.

**Note:** Currently to submit the form, limited fields are required; however we strongly encourage you to complete the form with as much information as you can provide.

## Program Reporting

Please provide number of visits or number of unduplicated households, or both. If you collected more information, we welcome you to share this as well.

Total Number of Households Served this Month \*

Number of Unduplicated Households served this month

Number of unduplicated children (under age 18) served this month

Number of unduplicated adults (18-59) served this month

Number of unduplicated seniors (60+) served this month



# Instructions for Use

6. Once all required information is completed, submit the form.
7. If you have additional programs to report, or a previous month, there will be a link at the end of the form to complete a new submission. **Note:** Each program must be reported separately.



**Thank You!**

Your **Feb 2021** submission has been received for **Second Harvest Test Account**. **Click here** to complete another program submission.