



COMMUNITY ACTION AGENCY OF BUTTE COUNTY, INC.

2255 Del Oro Avenue; Oroville, California 95965; Phone: (530) 538-7559; Fax: (530) 533-7470

NORTH STATE FOOD BANK

Dear Agency Representative:

Enclosed is the member agency application that you requested from the North State Food Bank (NSFB). Please review this packet and send me the following items:

- A copy of your organization's letter of determination from the Internal Revenue Service verifying that the organization is a nonprofit, tax-exempt organization under section 501(c)(3) of the IRS code. (*Note: A religious organization can use the IRS letter from its national congregation if it can show that it is a congregation member.*)
- Completed Member Agency Contract (*see enclosed contract*) signed by the executive director or board chairperson or, if a religious organization, the pastor or head of congregation.
- Completed Member Agency Information form (*see enclosed form*).
- List of your organization's board of directors.
- A \$50 check from the agency account to pay for the one-time membership fee.

Once we have received all of the above items, I will call you to set up an appointment to monitor your agency. If your agency passes the on-site monitoring, you will be eligible to receive food from the NSFB.

If you have any questions, I can be reached at (530) 538-7559. Thank you.

Sincerely,

Thomas Tenorio
Executive Director

Enclosures

Please return completed application to:
North State Food Bank
c/o Community Action Agency of Butte County, Inc.
2255 Del Oro Avenue, Oroville, CA 95965

MEMBER AGENCY REQUIREMENTS

To qualify as a member agency of the Community Action Agency of Butte County, Inc. North State Food Bank (NSFB), an organization must:

1. Provide a copy of its letter of determination from the Internal Revenue Service verifying that the organization is a nonprofit, tax-exempt organization under section 501(c)(3) of the IRS code.
 - Agencies must prove public foundation status, if their advance-ruling period has expired.
 - Churches applying as a member of an umbrella church convention must provide either a copy of the listing of the churches that are part of their convention or a letter from a regional or national office of the convention stating that their church is part of the convention.
2. Sign a Member Agency Contract and complete the Member Agency Information Form.
3. Submit a list of its board of directors with addresses and telephone numbers.
4. Pass an on-site inspection.
5. Distribute without charge food obtained from the NSFB.
6. Serve people without regard to race, creed, national origin, age, sex, or handicap.
7. Pay a one-time membership fee of \$50.
8. Pay with checks from the Member Agency's account with 501(c)(3) status.
9. New agencies must pay invoices COD or within 10 days for the first six months from the initial NSFB invoice.

Organizations applying as food pantries must also:

1. Make every effort to provide balanced, nutritious food baskets.
2. Accept referrals from the NSFB, social workers, local ministers and rabbis, and local community service agencies, and be listed in any Food Resource Directory published by the NSFB.
3. Keep regular posted hours and provide ongoing service to the general public.
4. Inform the NSFB, in writing, regarding the number of households and people served each month. Reports are due by the 10th day of the month following the month in which service was provided

AGENCY DEFINITIONS

Food Pantries (FP): provide food to the general public on an ongoing basis. Pantries may limit the number of times they serve the same recipient in a given time period. Types of pantries include:

- **Emergency Food Pantries:** provide three-day supplies of food to people in crisis situations. Food baskets are put together according to a suggested menu.
- **Supplemental Food Pantries** provide balanced food bags to needy people on a regular basis (*usually weekly*). Typically, these programs are less restrictive with regard to how often a family or individual can receive food.

Soup Kitchens (SK): provide free meals to the general public. In order to qualify as a soup kitchen, the program must be ongoing with publicized hours and location.

Homeless shelters (HS): provide housing and meals to homeless individuals and families. Formal shelter programs offering extended services to shelter residents and past shelter residents are included in this category.

Congregate meal sites: prepare meals on site for a particular group of needy or disadvantaged people. After school programs (AS) low-income child care centers or schools for special populations (DC), group homes for children under 18 (GH), transitional and rehabilitation programs (RH).

Senior Programs (SP): direct the food they receive toward the senior population.

Supplemental Specific (SS): programs provide bags of food to a specific population (e.g. residents of a particular low-income neighborhood, parents of children in a low-income day care program, people with HIV/AIDS). They generally do not prepare meals on site.

NORTH STATE FOOD BANK DISTRIBUTION POLICIES

Donated Food: The NSFB solicits donations of surplus and unmarketable food from manufacturers, retailers, farmers, brokers, and other sources, then distributes this food to charitable agencies in the counties of Butte, Glenn, Colusa, Plumas and Sierra that serve needy residents in each county. The NSFB also sponsors food drives with community groups.

Priorities: Our primary goal is to see that food resources are distributed to local residents most in need and at risk of hunger. To this end, we set priorities as follows:

1. Food pantries, soup kitchens, and homeless shelters.
2. Direct service programs of the NSFB, including Food for Children, Brown Bag, Friday's Table and The Food Assistance Program.
3. Other local charities (senior citizen agencies, low-income childcare centers and after school programs, group homes, transitional and rehabilitation programs, and others).

NSFB staff may, from time to time, determine that there is a limited supply of certain food and non-food items and distribute it according to the above priorities. In practice, this means that these food items may be limited to programs that fall in one of the first two priorities.

Agency Service Fee: Some of the food that we distribute, such as bread and produce, is free to member agencies. For other food items, agencies pay an agency service fee of 18¢ per pound. This fee partially defrays operating costs of the NSFB and commercial transportation and storage charges that are incurred when donations from national food companies are delivered by truck or rail to us. Member agencies cannot request or accept cash donations from recipients. All food and other products received from the NSFB must be given to the needy at no cost to the recipient. Agencies must pay for the food with checks from their agency checking accounts, using income from agency budgets, special fundraising events, or grants. We do not accept cash or personal checks.

Purchased Food: The NSFB purchases staple food items from wholesalers and vendors and agencies pay 10% above cost for this food. Items such as pinto beans, rice, canned fruit and vegetables, powdered milk, peanut butter, tuna, and pasta are normally available at all times.

USDA Commodities: We are responsible for distributing United States Department of Agriculture (USDA) commodities. Recipients must meet federally established income guidelines.

Inactive Agencies: Member Agencies that do not use the NSFB at least once in a calendar year are designated inactive and are not allowed to receive food from the NSFB. To become active again, Member Agencies must pass an on-site inspection and inform the NSFB of any program changes.

Delivery to Agencies: Delivery is available to agencies that meet certain qualifications. Agencies must meet a number of criteria (available upon request) in order to be eligible for delivery and specific agencies are eligible for delivery based on grants. Most member agencies pick up food from NSFB warehouses weekly, every other week, or monthly.

MEMBER AGENCY INFORMATION

Organization: _____

Address: _____

Contact Name/Title: _____ Phone: _____

PROGRAM: (please check boxes that apply, then answer the questions in the appropriate section(s) below)

You may wish to refer to the Agency Definitions on the page titled Member Agency Requirements.

- | | | |
|--|--|--|
| Food Pantry <input type="checkbox"/> | Soup Kitchen <input type="checkbox"/> | Homeless Shelter <input type="checkbox"/> |
| After School <input type="checkbox"/> | Day Care/School <input type="checkbox"/> | Group Home <input type="checkbox"/> |
| Senior Services <input type="checkbox"/> | Supplemental Specific Program <input type="checkbox"/> | Rehab (incl. resident or day) <input type="checkbox"/> |

FOR ALL PROGRAMS:

1. How much money do you budget each month to purchase food? _____
2. Where does this money come from? (list sources of funding) _____

3. Do you have a refrigerator? Yes No
4. Do you have a freezer? Yes No

FOOD PANTRY/SUPPLEMENTAL SPECIFIC PROGRAMS

1. How many families do you serve in an average month? _____
2. How many individuals do you serve in an average month? _____
3. What percentage of these people are referred to you? _____
4. Do you attempt to qualify the people who are not referred? Yes No
If yes, how? _____
5. What days and hours are you open? _____

SOUP KITCHENS/HOMELESS SHELTERS/RESIDENTIAL PROGRAMS/DAY CARE AND AFTER SCHOOL PROGRAMS

1. Is your kitchen licensed? Yes No
If yes, by what licensing agency? _____
2. Which meals do you prepare? Breakfast Snack Lunch Dinner
3. How many meals do you serve in an average month? _____
4. What percentage of the people you serve are low-income? _____
5. What percentage of the people you serve are repeats? _____
6. Do you serve one age group in particular? Yes No
If yes, what age group? _____

ALL OTHER PROGRAMS:

1. How often do you distribute food? _____
2. How many bags of food do you distribute in an average month? _____
3. What is the average family size? _____
4. What percentage of the people you serve are low-income? _____
5. Do you serve one age group in particular? Yes No
If yes, what age group? _____

To the best of my knowledge, the information provided is true and correct.

Executive Director's Signature: _____ Date: _____