

# FY24 School-Based Food Assistance Program

Reporting Platform Instructions



Updated: 3/6/2024

# Reporting Notes – Required and Recommended Fields

**Required Fields** will have a red asterisk symbol (\*) next to a question

Total # of Households (duplicated) \*

**Recommended Fields** will not have a red asterisk symbol (\*) next to a question

Total # of Households (unduplicated)

# Reporting Notes – Duplicate vs. Unduplicated (aka: unique)

**Duplicated:** the total number of units your organization served over a specified time-period.

**Unduplicated:** the total number of *unique* units your nonprofit served over a specified time-period.

**With duplicated counts, you might count the same person or household more than once, but with unduplicated counts, you count them only once, even if you serve them numerous times in a month.**

## School-Based Food Assistance Grant Program

Welcome to the Impact Report Platform! Grantees of the Fiscal Year 2024 School-Based Food Assistance Grant Program are expected to submit a mid-cycle and end-of-cycle programmatic and financial report.

### Report Type: Programmatic or Financial Report

Report Type: Mid-Cycle, End-Cycle, or Financial Report \*

Name of your organization \*

Food Service Data

**Access the reporting platform  
here: [bit.ly/sb\\_fy24](https://bit.ly/sb_fy24)**

# Programmatic Report

# 1. Programmatic Report: Type Section



## School-Based Food Assistance Grant Program

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Report Type: Mid-Cycle, End-Cycle, or Financial Report \*

1

Find an option

2

1. Click on the drop-down
2. Select “Programmatic Report” for Report Type

# 1. Programmatic Report: Type Section (continued)

## Report Type: Programmatic or Financial Report

Report Type: Mid-Cycle, End-Cycle, or Financial Report \*

1 Programmatic Report: Mid-Cycle Report

Name of your organization \*

+

2

Search

Community Farm Share

Manna Food Center

Nourishing Bethesda

Rainbow CDC

Shepherd's Table

Small Things Matter

So What Else

(duplicated) \*

Total # of Households with children 0-5  
(duplicated)

this report? \*

specified period of time.

Unduplicated the total number of unique units your organization served over a specified period of time.

With duplicated counts, you might count the same person or household more than once, but with unduplicated counts, you count them only once, even if you serve them numerous times during the relevant performance period.

Yes

1. Select the Programmatic Report with the respective performance period
2. Click on the [+] button and select your organization

# 2. Programmatic Report: Participation & Implementation Section

**Report Type: Programmatic or Financial Report**

Report Type: Mid-Cycle, End-Cycle, or Financial Report \*

Programmatic Report: Mid-Cycle Report

Name of your organization \*

Manna Food Center

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**Participation and Implementation**

Select one school \* **1**

Find an option

- 2** Clarksburg ES
- Farmland ES
- Gaithersburg HS
- John L. Gildner Regional Institute for Children and Adolescents (RICA)
- Richard Montgomery HS

YES

- 1. Fields with (\*) symbol are **required**
- 2. Select your school [reminder: one report per school]



# 2. Programmatic Report: Participation & Implementation Section (cont.)

Name of your organization\* Manna Food Center X

Select one school\* Clarksburg ES v

Total # of Students (duplicated)\* 1,000 ①

Total # of Households (duplicated)\* 700

Total # of Households with children 0-5 (duplicated) 650

Will you be providing unduplicated totals for students or households in this report?\*

Reporting Note:

Duplicated the total number of units your organization served over a specified period of time.

Unduplicated the total number of unique units your organization served over a specified period of time.

With duplicated counts, you might count the same person or household more than once, but with unduplicated counts, you count them only once, even if you serve them numerous times during the relevant performance period.

Yes ②

No

Clear Selection

Total # of Students (unduplicated) ③ 250

Total # of Households (unduplicated) 200

Total # of Households with children 0-5 (unduplicated) 175

- 1. Duplicated Totals: Only report numeric answers (required)
- 2. Indicate if you will provide unduplicated answers by selecting yes or no (required).
- 3. Unduplicated totals are recommended (not required).

# 2. Programmatic Report: Participation & Implementation Section (cont.)

Total # of Students (unduplicated)	Total # of Households (unduplicated)	Total # of Households with children 0-5 (unduplicated)
<input type="text" value="250"/>	<input type="text" value="200"/>	<input type="text" value="175"/>
<b>Household Zip Codes</b>		
If the home zip codes of food assistance recipients were collected, follow these instructions to provide data:		
1. Select the zip codes of school-based food assistance recipients served during the relevant performance period by clicking on the [+] button below		
2. Type the total number of households that you served, that live in that zip code		
<input type="text" value="20813"/> × <input type="text" value="20815"/> × <input type="text" value="20839"/> × <input type="text" value="20838"/> × <input type="text" value="+"/> <b>1</b>		
20813 *	20815 *	
<input type="text" value="145"/>	<input type="text" value="254"/> <b>2</b>	
20838 *	20839 *	
<input type="text" value="150"/>	<input type="text" value="151"/>	

- Recommended:  
Zip Code Section**
1. Click on [+] button to select the zip codes you will be reporting (duplicated households)
  2. Only report the number of households you served that live in that zip code.

# 3. Programmatic Report: Food Service Data Section

## Food Service Data

Please select your service format \*

- Family Market
- Choice Pantry
- Pre-Package Box/Bag
- Prepared Meals
- Gift Cards
- Other

Family Market (total pounds) \*

850

Do you accommodate cultural or medically-tailored diets? \*

- Yes
- No

Clear Selection

Service Format - Other \*

sample text

Select the types of food offered \* (click all that apply)

- Shelf-stable
- Meat/Dairy/Eggs
- Produce
- Prepared food/meals
- Other

Choice Pantry (total pounds) \*

650

Please briefly describe your cultural or medical accommodations

sample text

Food Offering - Other

Please explain your other food offering

sample text

1. Service Format: Select all options that apply (required)
2. If "Other" is selected, a text will appear
3. Quantities/ Volume: Each service format will have a unit (ex: "total pounds") – include total pounds for the relevant performance period (required)
4. Culturally/ Medically-Relevant Foods: If "Yes," please provide a brief description (required)

## Narrative Feedback

# 4. Programmatic Report: Narrative Feedback

## Narrative Feedback

The answers below are private and will not be shared with any school.

Please share any success stories that happened during the relevant performance period while working with this school. \*

sample text **1**

Please share any unexpected challenges that occurred during the relevant performance period while working with this school. \*

sample text

Please share any strategies taken during the relevant performance period to ensure cultural proficiency, inclusivity of underserved community members, and the use of a racial equity lens in providing services. \*

sample text

## Communication and Partnerships

How would you rate the effectiveness of communication and collaboration with the school?

Please provide a self-score from 1 to 10

This answer is private and will not be shared with any school

★★★★★★★★★

Please provide additional comments on the score provided.

sample text **3**

- 1. Narrative Feedback: Write directly in the textbox or copy and paste from a separate document (required)
- 2. School Collaboration: Click on the star to register an answer (recommended)
- 3. Self Score Commentary: Provide context for your self-score (recommended)

# 5. Programmatic Report End of the Report: Contact Info

### Financial Report

Financial reports are only completed once per relevant performance period. This section is available when selecting **Financial Report** in the Report Type Section.

1

### Contact Information

Your Name \*

Phone Number \*

2 Contact Email \*

Check this box if you would like to receive a copy of this report. A report copy will be sent to the email above.


3

[Clear form](#)

- 1. Note: If you selected a programmatic report at the beginning, this section will be empty – you can skip it.
- 2. Contact Information: Write your full name, phone number, and a valid email address. **(required)** The system will send a copy of this report to that email address
- 3. Want a copy? Check this box to receive an email copy of this report

# 6. Programmatic Report: Email copy of your report

1 Thank you for submitting your Programmatic Report: Mid-Cycle Report Inbox x

 Office of Food Systems Resilience (via Airtable) <noreply+automations@airtableemail.com> 4:24 PM (4 minutes ago) ☆  
to me ▾

Dear Test User,

Thank you for submitting your **Programmatic Report: Mid-Cycle Report** on behalf of **Manna Food Center**, submitted on **3/6/2024 at 4:24pm**

**FY24 SB Grantees**

Manna Food Center

**Report Type**

Programmatic Report: Mid-Cycle Report

**Manna Food Center School**

Clarksburg ES

**Total # Students (duplicated)**

1000

**Total # household (duplicated)**

If the check-box was selected, you will receive an email copy of your report. Do not reply to this email.

# Financial Report

*All Sections are REQUIRED.*

# 1. Financial Report: Type Section



## School-Based Food Assistance Grant Program

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### Report Type: Programmatic or Financial Report

Report Type: Mid-Cycle, End-Cycle, or Financial Report \*

1

Find an option

- Programmatic Report: Mid-Cycle Report
- Programmatic Report: End-Cycle Report
- Financial Report: Mid-Cycle Report
- Financial Report: End-Cycle Report 2

### **REQUIRED**

1. Click on the drop-down
2. Select “Financial Report” for Report Type



# 1. Financial Report: Type Section (cont.)

## School-Based Food Assistance Grant Program

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Report Type: Mid-Cycle, End-Cycle, or Financial Report \*

1

Financial Report: Mid-Cycle Report

Name of your organization \*

+

2

Search

Community Farm Share

Manna Food Center

Nourishing Bethesda

Rainbow CDC

Shepherd's Table

Small Things Matter

So What Else

### **REQUIRED**

1. Select Financial Report and the respective performance period
2. Click on the [+] button and select your organization

## 2. Financial Report: Financial Report Section

**Report Type: Programmatic or Financial Report**

Report Type: Mid-Cycle, End-Cycle, or Financial Report \*

Financial Report: Mid-Cycle Report

Name of your organization \*

Community Farm Share

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**Participation and Implementation**

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**Food Service Data** ①

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**Narrative Feedback**

The answers below are private and will not be shared with any school.

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**Communication and Partnerships**

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**Financial Report** ②

1. Once you select a Financial Report and the name of your organization, the program sections will be blank.
2. You can skip the Participation and Implementation, Food Service, Narrative Feedback, and Communication and Partnership sections and go directly to the Financial Report section.

## 2. Financial Report: Financial Report Section (cont.)

### Financial Report

Financial reports are only completed once per relevant performance period. This section is available when selecting **Financial Report** in the Report Type Section.

Percentage of the grant budget spent to date \*

55%

1

Comments on the percentage spent \*

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2

Percentage (%) of food sourced from County farms, DMV-region farms owned by people of color, and/or locally owned retailer(s) \*

75%

Please provide a narrative feedback detailing your expenditures and use of grant funds to support programming during the selected performance period \*

In sagittis, risus vel tincidunt consequat, mauris nibh elementum est, nec convallis arcu arcu sed nisl. Integer blandit tellus vitae neque lobortis, quis bibendum odio efficitur. Pellentesque habitant morbi tristique senectus et netus et malesuada fames ac turpis egestas. Integer suscipit nibh dui, vel consectetur augue tristique eu.

Upload receipts, proof-of-payments, and/or other relevant proof of project costs incurred \*

Drop files here or [browse](#)

3

### **REQUIRED**

1. **Percentage of grant budget spent:** Write a number between 0-100 to avoid errors. The field will automatically add a percent symbol.
2. **Comments on percentage spent:** Write directly in the textbox or copy and paste from a separate document.
3. **Upload files to your report:** Click on "browse". A window will appear with upload options.

## 2. Financial Report: Financial Report Section (cont.)

**Financial Report**

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Percentage  
75%

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Upload receipts, proof-of-payments, and/or other relevant proof of project costs incurred \*

Drop files here or [browse](#)

Local Files **1**

Link (URL)

Webcam

Google Drive

OneDrive

Box

Dropbox

Drop files here or [browse files](#) **2**

1. There are other options for linking files, however, uploading "local files" (from your device) is preferred.
2. Select "browse files" and pick the file from your device.

## 2. Financial Report: Financial Report Section – Upload File

**Financial Report**

Financial re  
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Local Files

Link (URL)

Webcam

Google Drive

OneDrive

Box

Dropbox

Clear all files

1 file selected

+ Add more

Financial\_Report\_MidCycle.pdf  
33 KB

Upload 1 file

Drop files here or [browse](#)

1. You can add more than one file. Select “Add more” to upload more files.
2. Once finished, select the blue button, “Upload [#] file(s)”

## 2. Financial Report: Financial Report Section – Upload File (cont.)

Please provide a narrative feedback detailing your expenditures and use of grant funds to support programming during the selected performance period \*

Aliquam et purus vel enim congue posuere. Fusce semper vestibulum est, quis egestas risus scelerisque sit amet. Ut porttitor feugiat tristique. Interdum et malesuada fames ac ante ipsum primis in faucibus. Cras dictum ante sed iaculis pellentesque. Sed eu gravida elit. Quisque condimentum mattis pharetra.

Upload receipts, proof-of-payments, and/or other relevant proof of project costs incurred \*

📎 Attach file



Financial\_Report\_MidCycle.pdf

1



Invoice\_04.05.2024.pdf

Please upload a completed copy of the Financial Progress Report in the Financial Progress Report Template format provided by the Office of Grants Management. \*

You can download the Financial Progress Report [here](#).

2

📎 Drop files here or [browse](#)

3


### **REQUIRED**


1. You can see the file names you have attached to your report. Attach as many files as needed.
2. Office of Grants Management Financial Progress Report Template: Download the template and fill it in before uploading.
3. Upload this Financial Progress Report in the same way as the other attachments (*see slides 20-21*).

### 3. Financial Report: End of the Report - Contact Info

Grants Management.

You can download the Financial Progress Report [here](#).

 Attach file



Financial Report Template.xlsx **1**

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**Contact Information**

Your Name\*  **2**

Phone Number\*

Contact Email\*

Check this box if you would like to receive a copy of this report. A report copy will be sent to the email above.

**3**

[Clear form](#)  **4**

### **REQUIRED**

1. Upload your Financial Progress Report
2. Contact Info: Write your full name, phone number, and a valid email address. The system will send a copy of this report to that email address
3. Want a copy? Check this box to receive an email copy of this report
4. Click "Submit Report" when you have completed your report

# 4. Financial Report: Email copy of your report

1 Thank you for submitting your Financial Report: Mid-Cycle Report > Inbox x

Office of Food Systems Resilience (via Airtable) <noreply+automations@airtableemail.com> 10:27 AM (27 minutes ago) ☆ 😊  
to me ▾

Dear Test User,

Thank you for submitting your **Financial Report: Mid-Cycle Report** on behalf of **Community Farm Share**, submitted on **3/8/2024 at 10:27am**

**FY24 SB Grantees**

Community Farm Share

**Report Type**

Financial Report: Mid-Cycle Report

**Contact Name**

Test User

**Contact Phone**

(301) 111-1111

You will receive an email copy of your report. Do not reply to this email.



# Questions?

Contact: Catherine Nardi, Program Manager  
([catherine.nardi@montgomerycountymd.gov](mailto:catherine.nardi@montgomerycountymd.gov))