



2024 FOOD INTAKE FORM

A completed intake form must accompany each cash or food delivery.
Please do not omit any information on this form.

**FOOD MUST BE DELIVERED September 27th
between 10:00 AM and 12:00 PM.**

Please print.

Company Name: _____

(ONE form PER Management Company)

Contact Person Name: _____

Email Address: _____

Phone #: _____

Barrels borrowed: _____ # Barrels returned: _____

Total Food Items ONLY _____ (**DO NOT** include \$\$ in total)

Total Dollars ONLY \$ _____

(DO NOT convert dollars to items -- Should include all online donations)

If you have any questions, please email: events@atl-apt.org

PLEASE MAKE ALL CHECKS PAYABLE TO: ATLANTA COMMUNITY FOOD BANK

THANK YOU for YOUR participation in the 2024 Food-A-Thon!