

# Sharing Thanksgiving 2009

In 2008 God's Pantry Food Bank distributed approximately 3,700 boxes in Fayette County.

***The guideline format and information has changed this year, so please read all of this carefully.***

There are 8 sections:

1. Description of Sharing Thanksgiving Program
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4. Pantry Locations, Dates, and Times
5. Referral Form Directions
6. Delivery to Clients
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Please call or email Linda Lancaster, Community Services Coordinator, at 288-5319 or [linda@godspantry.org](mailto:linda@godspantry.org) if you need more information or have any questions or concerns.

# 1. Description of Sharing Thanksgiving Program

The Sharing Thanksgiving Program has been operating for many years in Fayette County. We depend entirely upon donations for this program. We cannot guarantee that all basket referrals will be met.

All Thanksgiving baskets will contain the same ingredients (see list on last page). Some items may change due to availability. Families of six (6) or more people will receive two boxes of the non-perishable items and the same number of perishable items as everyone else.

Emergency food boxes filled during that week will contain the usual food box contents, not a Thanksgiving meal. **NO CLIENT WILL RECEIVE BOTH.** A Thanksgiving basket will not count as a food box and will not be charged as one of the 4 times in 6 months services.

EMERGENCY FOOD BOXES WILL BE DISTRIBUTED THANKSGIVING WEEK FROM PILGRIM PANTRY (Nov. 23, 24, & 25) AND NATHANIEL PANTRY (Nov. 24 & 25).

No Thanksgiving baskets will be issued from Pilgrim. *Neither of these pantries will have turkeys, only emergency food boxes.*

We will make every attempt to accommodate pick-up date preferences for baskets distributed through the pantries. However, we may have to change dates if it is logistically impossible to meet the need at any given location.

**All clients will pick up at pantries unless they qualify for delivery.**

Clients must bring their Social Security cards and picture I.D.'s in order to pick up their Thanksgiving referrals. If someone (friend or family member) is picking up on their behalf, that person must have the client's I.D. and SSN card, plus a note signed by the client authorizing that person to pick up for them.

***No last minute requests for Thanksgiving baskets will be accepted.***

## 2. Eligibility Requirements

**All clients must be Fayette County residents.**

Please screen clients carefully to determine if they meet the eligibility requirements.

**Households who meet the following income eligibility guidelines will qualify for the Sharing Thanksgiving program.**

Number in Family	Monthly Income
1	\$1,174
2	1,579
3	1,984
4	2,389
5	2,794
6	3,200
7	3,605
8	4,010

\*Each additional family member after 8 add: \$406

These requirements are based on 130 percent Federal Poverty Income Guidelines effective March 27, 2009.

### **Agency Employees:**

Agency employees who meet the preceding eligibility requirements and would like a referral for Thanksgiving must acquire their referral through an agency **not** associated with their place of employment.

### 3. Important Dates & Open Registration

#### DEADLINES:

- October 1  
[received by 5:00 p.m.]      **DEADLINE FOR THANKSGIVING BASKET REFERRALS BY AGENCIES. No referrals accepted after this date.**
- October 23      **LAST DAY FOR ANY CORRECTIONS. (CLIENT HAS A NEW ADDRESS OR PHONE, OR MOVES OUT OF FAYETTE CO. OR IS DECEASED)**
- November 23, 24, & 25      **DISTRIBUTION OF THANKSGIVING BOXES. (See section 4 for more detailed information)**

### **OPEN REGISTRATION**

We prefer clients be referred directly by agencies. However, open registration for individuals will be available. Registration must be done in person by the *adult client* or by a *representative with proper ID*. NOTE: clients will not be assured of a box when they apply. They will be notified by mail from God's Pantry Food Bank in early November.

**October 12:**      *Broadway Christian Church Pantry  
187 N. Broadway  
3:00 p.m. – 7:00 p.m.*

**October 14:**      *Central Christian Church Pantry  
219 E. Short St.  
1:00 – 4:00 p.m.*

**October 16:**      *St. Luke United Methodist Church  
2351 Alumni Dr.  
1:00 – 4:00 p.m.*

#### **For Open Registration:**

**Clients must supply a picture I.D. and Social Security Number for each adult (adult is 18 years and older) in the household, proof of children in the household, proof of income, and proof of residency in Fayette County.**

## 4. Pantry Locations, Dates, & Times

### Pantries Open Only For Thanksgiving Distribution:

<u>Pantry/Location</u>	<u>Dates</u>	<u>Times</u>
<b>Broadway</b> 187 N. Broadway	Nov. 23 & 24 <u>[closed on Nov. 25]</u>	11:00 a.m. – 2:00 p.m. 5:00 – 8:00 p.m.
<b>Central</b> 219 E. Short St.	Nov. 23, 24, & 25	1:00 – 4:00 p.m.
<b>Gardenside</b> 1667 Alexandria Dr. [located behind Gardenside Baptist Church]	Nov. 23 & 24 <u>[closed on Nov. 25]</u>	5:00 – 8:00 p.m.
<b>Nathaniel</b> 616 DeRoode St.	Nov. 23 <u>[open only on Monday for Thanksgiving distribution]</u>	1:00 – 4:00 p.m.
<b>St. Luke</b> 2351 Alumni Dr.	Nov. 23, 24, & 25	1:00 – 4:00 p.m.

### Pantries Open Only for Emergency Food Box Referrals:

<b>Nathaniel</b> 616 DeRoode St.	Nov. 24 & 25 (Tues. & Wed.)	1:00 – 4:00 p.m.
<b>Pilgrim</b> 541 Jefferson St.	Nov. 23, 24, & 25 (Mon., Tues., & Wed.)	1:00 – 4:00 p.m.

***No client may have an emergency food referral for Nov. 23, 24, or 25 if they have a Thanksgiving referral.***

## 5. Referral Form Directions

NOTE THAT THERE IS A SEPARATE FORM FOR EACH DAY---  
NOVEMBER 23, 24, & 25.

The forms will be available for you to download from our website ([www.godspantry.org](http://www.godspantry.org)) to fill out and return to us via email.

Please do not duplicate any client being referred if you submit forms more than once.

**Only agency representatives are to fill in the referral forms.**

Only adult names and LAST 4 DIGITS of their social security numbers are to be listed for each household. Please do not write in children's names (defined as those persons 17 years and younger) or their social security numbers. We only need to know **number of children**. This number should **include** any infants.

### **Completing the Information on the Referral Form:**

**PLEASE SUBMIT ONLY THROUGH EMAIL.**

1. Select the correct form for the date you desire.
2. Type in all agency information on the top of the form. This includes Agency ID number, Agency Phone number, Agency Fax number, Agency Contact name, Agency Name, and Agency Address. You must put in your name after "Agency Contact Name". If there are questions, we will need to have the name of the contact person.
3. Please type "HH" if a person is the head of household in the first column for each first or only adult in the household. Leave blank for subsequent adults in the household.
4. You must enter the pantry code on the form for each adult.

5. List first name, then last name and LAST 4 DIGITS of the social security numbers of all adults in household (age 18 years and older). Do not list children's names and social security numbers.

\*Immigrants without social security numbers - please leave the SSN field blank.

6. Type in the correct address for the household. We need street number ("123", "4525", "771-A" - if duplex) street name (please type "Drive, Road, Way, Place, etc.), apt. number ("46", "L-23", "29-C" --- please do not use "Apt." or "#") and zip code. *Please type this information in for all adults, regardless of how many adults in a household.*

7. Type in the phone number. If there is not a phone, leave space blank.

8. Type in total number of adults in household (18 yrs. & older) --- only put this number in after the "HH" adult.

9. Type in total number of children (17 yrs. & younger) in household (**include** infants in this number) --- only put this number in after the "HH" adult.

### Emailing your completed forms:

In the subject line of your email message please put "Thanksgiving 2009".

Email to [thanksgiving@godspantry.org](mailto:thanksgiving@godspantry.org) and you will receive a response that we received your referral form. If there is information missing, we will send a message back that you must provide all information.

**ONCE YOU HAVE EMAILED THE FORMS, YOU MUST USE A NEW FORM FOR ADDITIONAL REFERRALS. YOU MAY NOT ADD NAMES TO FORMS THAT YOU HAVE PREVIOUSLY EMAILED.**

Email the forms as they are completed --- **full pages, please.** This will help us with input and avoid a CRUNCH on the deadline date (October 1, 2009).

The following is a very important change from previous years:

When clients sign up please inform them that God's Pantry Food Bank will send them a letter later notifying them of their pantry site, date and pick up times.

**We ask that agencies not contact clients with any pick up information.**

## 6. Delivery to Clients

With the assistance of two local churches delivery of Thanksgiving boxes will be available for the following households who do not have anyone to pick up for them at a pantry:

1. elderly clients
2. disabled or critically ill clients
3. single parent households with more than 3 children

We are aware that many people do not have transportation, but perhaps can use public transportation, or have a family member or friend take them or pick up on their behalf.

Please carefully screen the clients who truly need a delivery, as there will be a limited number that will be served in this manner.

Please be sure to include the clients' phone numbers in case the churches need to contact the clients regarding directions to their addresses.

\*The pantry code to use for delivery will be **"IM"**.

## 7. Warehouse Pick-Ups by Agencies

In order to pick up for your clients at the warehouse, please follow the steps below.

1. You are required to have a minimum of 10 households, which you must pick up at one time. [You may not pick up for 2 or 3 households and then come back and get the other ones.]
2. Please write a letter of request, to be received by God's Pantry no later than September 14, 2009, for warehouse pick up to:

[danielle@godspantry.org](mailto:danielle@godspantry.org)

OR

Danielle Tussey, Programs Director  
God's Pantry Food Bank  
1685 Jaggie Fox Way  
Lexington, KY 40511-1084

[This must be done prior to sending in your Thanksgiving referral forms, and please put "WH" as pantry location on the forms.]

3. After receiving confirmation of your request, email your referral form(s) to [thanksgiving@godspantry.org](mailto:thanksgiving@godspantry.org).
4. Be sure and use "WH" as the pantry code on the referral forms.

**Warehouse pick-up will be one day only:**

Monday, Nov. 23 --- 10:00 a.m. to 12:00 p.m.  
Agency will be given an appointment time to pick up.

## 8. Basket Contents

(\*\*some items may change due to availability)

Turkey

Instant Mashed Potatoes

Canned vegetables

Canned yams

Canned fruit

Cranberry sauce

Dressing mix

Gravy

Corn muffin mix

Dessert

Margarine

Eggs

Onion