

Healthy Food Pantry Assessment Tool

PANTRY INFORMATION: *(This is not part of assessment scoring.)*

Date of Visit:

Rater Name:

Name of Pantry:

Pantry Address

(if mobile, record the address of “home” location of pantry or mailing address)

(Street)

(City)

(State)

(Zip code)

Pounds of food distributed last month:	Number of clients served last month:	Is this a mobile or school pantry? <i>(Check ONE)</i>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input type="checkbox"/> <i>Mobile Pantry</i> <input type="checkbox"/> <i>No</i>
		<input type="checkbox"/> <i>School Pantry</i>

A. Location & Entrance

<p>1. See attached “Walkability Checklist” to determine the Walkability score. <i>This number will be subtracted in the score calculation.</i></p>	Needs Improvement < 15	Okay 16-20	Good 21-25	Great ≥26	Score <i>(Write Answer)</i>
	-3	-2	-1	0	
<p>2. Is there a bus line within one street block of the Pantry?</p>			No	Yes	
			0	1	
<p>3. Is the Pantry accessible by persons of all abilities?</p>	No, No Access	Yes, Limited Access or Alternative Entry	Yes, Fully Accessible Main Entrance & Exit		
	0	1	2		
<p>4. Does the agency where the Pantry is located either have its own parking lot or share a lot?</p>			No	Yes	
			0	1	
<p>5. Are the windows of the Pantry free of bars or barriers? <i>Include the building where the Pantry is located.</i></p>			No	Yes	
			0	1	
<p>6. Is there signage indicating the Pantry’s location from the nearest road?</p>			No	Yes	
			0	1	

#2-6 Subtotal

HFPAT USERS: Please include this statement, appropriate to your usage of the HFPAT

The Healthy Food Pantry Assessment is a product of the Regional Nutrition Education and Obesity Prevention Center of Excellence–West and is being adapted with permission. Available at:

<https://snaped.fns.usda.gov/materials/healthy-food-pantry-assessment-toolkit>

Healthy Food Pantry Assessment Tool

7. **On which days of the month is the Pantry open to serve clients?** *In the calendar below, put an “X” for each day of the month the Pantry is open. This question is NOT scored.*

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Week 1							
Week 2							
Week 3							
Week 4							

Score
(Write
Answer)

8. **What hours is the Pantry open to serve clients on the days selected above?** *Please describe if these hours are different for different client populations like seniors, refugees, etc. This question is NOT scored.*

9. **What kind of check-in procedure does the Pantry use for FIRST TIME clients?**

Multiple Documents Required <i>(Proof of address, proof of income, ID, etc.)</i>	Some Documents Required <i>(Proof of address & ID ONLY)</i>	One Document Required <i>(Either proof of address OR ID)</i>
0	1	2

10. **What kind of check-in procedure does the Pantry use for RETURNING clients or clients ON THEIR SECOND or FOLLOWING visits?**

Multiple Documents Required <i>(Proof of address, proof of income, ID, etc.)</i>	Some Documents Required <i>(Proof of address & ID ONLY)</i>	No Documents Required <i>(No proof required)</i>
0	1	2

11. **Does the Pantry have an electronic check-in procedure?** *Yes or No? If Yes, please describe. This question is NOT scored.*

12. **Where is the waiting line for CHECK-IN and is there a place to sit down?** *Choose ONE.*

Outside waiting line and NO seating	Outside waiting line WITH Seating	Inside waiting line WITHOUT Seating	Inside waiting line WITH Seating
0	1	2	3

13. **Overall, how long do clients usually wait to receive food AFTER checking in?**

Wait time is usually more than 30 minutes	Wait time is usually more than 10 minutes and less than 30 minutes	Wait time is usually 10 minutes or less
0	1	2

#2-6 Subtotal HERE (page 1) →

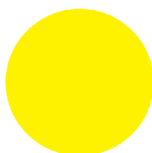
#9, 10, 12, & 13 Subtotal HERE (page 2) →

Subtract Walkability Score (page 1) →

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A. Location & Entrance

Section A TOTAL HERE →



Healthy Food Pantry Assessment Tool

B.1. Food Availability to Clients – Food Distribution

14. **Does the Pantry have access to a garden, farm, or farmer’s market that provides fresh produce to the Pantry (this includes Food Sense work with community gardens or gleaning that benefit the Pantry)?**

Score
(Write Answer)

No	Yes
0	1

15. **What kind of food distribution does the Pantry use to send food home with clients?**

Choose ONE. “Client Choice” means that clients remove the items directly from the shelf themselves like they were “shopping” in a grocery store.

Pre-packed Boxes ONLY	Mix of Pre-Packed Boxes & Volunteers Select Foods for Clients	Clients Choose and Volunteers Remove (Clients select their foods, but a volunteer handles & packs food)	Client Choice ONLY (Clients choose and remove ALL Foods themselves without assistance)
1	2	3	4

If 1, 2, or 3 are selected, Skip to #19

16. **Are FRUITS and VEGETABLES placed before other foods in the pick-up line? Includes FRESH, FROZEN, CANNED, or DRIED fruits and vegetables.**

No	Yes, Half of fruits & vegetables are in front of other foods	Yes, ALL fruits & vegetables are directly in FRONT of all other foods in the line
0	1	2

17. **Are fruits and vegetables placed at eye or waist level and easy to reach?**

No, Difficult to see and reach	Yes, Somewhat Can see them & difficult to reach	Yes, Both easy to see and reach
0	1	2

18. **Are there signs that highlight the LOCATION of fruits and vegetables within the Client Choice model? Examples: Thumbs Up signs, arrows, item locator signs, daily availability lists, etc.**

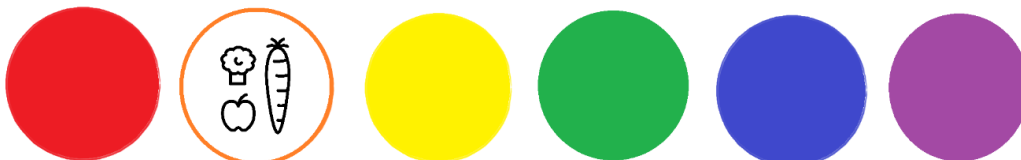
Fewer than 2 signs	2 or more signs
0	1

19. **Are there signs that highlight the NUTRITIONAL benefits of fruits and vegetables displayed throughout the Pantry (includes Thumbs Up shelf educators)?**

No Signs	1-3 signs	4+ signs
0	1	2

B.1. Food Distribution to Clients Score

#14-19 Subtotal HERE →



Healthy Food Pantry Assessment Tool

B.2. Fresh Fruits and Vegetables

20. **Is FRESH fruit available to clients on the day of the Pantry visit?**
If no, Skip to #23

No	Yes	Score (Write Answer)
0	1	

21. **What is the overall VARIETY of FRESH fruit in the Pantry on the day of the visit?**
Count each kind of fruit as one type; For example, yellow apples, red apples, and green apples would only count as ONE type of fruit.

None Available	Limited 1-3 types	Moderate 4-6 types	Wide Variety 7+ types
0	1	2	3

22. **What is the overall QUALITY of FRESH fruit in the Pantry on the day of the visit?**
Choose the best answer that represents the overall quality.

Poor/ Rotten <i>(Brown spots, many bruises, mold, inedible)</i>	Low-Medium Quality <i>(Unripe, hard, some bruises, edible)</i>	High-Medium Quality <i>(Over-ripe, fewer than 2 bruises, dull color, edible)</i>	High Quality <i>(Ripe, zero bruises, bright colors, edible)</i>
0	1	2	3

23. **Are FRESH vegetables available to clients on the day of the Pantry visit?**
If no, Skip to #26

No	Yes
0	1

24. **What is the overall VARIETY of FRESH vegetables in the Pantry on the day of the visit?** *Count each kind of vegetable as one type; For example, romaine lettuce, iceberg lettuce and butter lettuce would only count as ONE type of vegetable.*

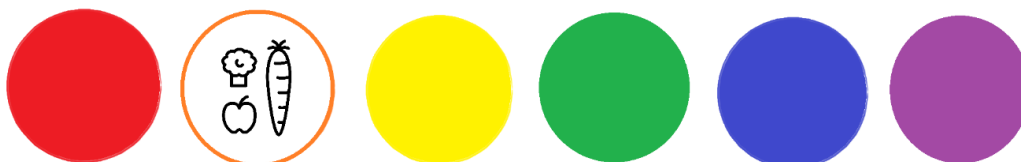
None Available	Limited 1-3 types	Moderate 4-6 types	Wide Variety 7+ types
0	1	2	3

25. **What is the overall QUALITY of FRESH vegetables in the Pantry on the day of the visit?** *Choose the best answer that represents the overall quality.*

Poor/ Rotten <i>(Brown spots, many bruises, mold, inedible)</i>	Low-Medium Quality <i>(Unripe, hard, some bruises, edible)</i>	High-Medium Quality <i>(Over-ripe, fewer than 2 bruises, dull color, edible)</i>	High Quality <i>(Ripe, zero bruises, bright colors, edible)</i>
0	1	2	3

B.2. Fresh Fruits and Vegetables Score #20-25 Subtotal HERE →

26. **Does the Pantry have FROZEN storage?** *This question is NOT scored.* Yes No
If No is Selected, Skip to Page 6. Do NOT answer questions about FROZEN foods.



Healthy Food Pantry Assessment Tool

B.3. Frozen Fruits, Vegetables, and Lean Protein

Count mixed vegetables or mixed fruit as 1 type of frozen vegetable or fruit. If there are two bags of mixed vegetables, one containing peas & carrots, and the other containing peas, corn, onions, & carrots, then this counts as 1 type of frozen vegetable.

Do NOT count mixed dishes like lasagnas, pastas, mixed noodle dishes, pies, pot-pies, TV-trays, breaded meat products, frozen potatoes, or snack products such as “Pizza Rolls.”

27. **What is the overall VARIETY of FROZEN fruit and vegetables in the Pantry on the day of the visit?** Count all frozen fruits and vegetables.

None Available	Limited 1-3 types	Moderate 4-6 types	Wide Variety 7+ types
0	1	2	3

Score
(Write Answer)

If None Available, Skip to #29 below.

28. **What is the overall QUALITY of FROZEN fruit and vegetables in the Pantry on the day of the visit?**

Poor/ Frost Covered (Frozen solid, not edible)	Some Frost (Slight frost visible on foods; check pre-cut foods)	Zero Frost (Little to no frost visible on any fruits or vegetables)
0	1	2

Variety of FROZEN & FRESH Lean protein. One type counts as a type of packaged LOW-FAT portion of poultry, seafood, tofu, or low-fat prepared legume or bean products. Count FRESH protein that has been FROZEN. Count any of the following as lean protein.

- Chicken with skin removed
- Lobster or shrimp
- Tofu
- Turkey with skin removed
- Cod, flounder or Sole
- Hummus or low-fat nut butters
- Clams or Mussels
- Low-fat luncheon meat
- Low-fat meat substitutes

★ If peanut butter is NOT labeled as LOW-FAT, do not count it in variety.

29. **What is the overall VARIETY of FROZEN and FRESH lean protein in the Pantry on the day of the visit?** Count all frozen or fresh lean protein sources, including fresh protein that has been frozen. Do NOT count DAIRY or EGGS in this question. DAIRY and EGGS are scored on Page 7.

None Available	Limited 1-3 types	Moderate 4-6 types	Wide Variety 7+ types
0	1	2	3

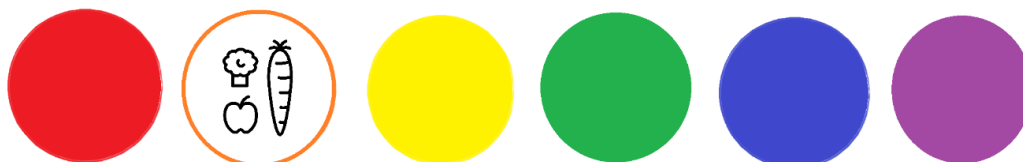
If None Available, Skip to #31 next page.

30. **What is the overall QUALITY of FROZEN and FRESH lean protein in the Pantry on the day of the visit?**

Poor/ Frost Covered (Frozen solid, not edible)	Some Frost (Slight frost visible on foods; check pre-cut foods)	Zero Frost (Little to no frost visible on any fruits or vegetables)
0	1	2

B.3. Frozen Fruits, Vegetables and Lean Protein

#27 - 30 Subtotal HERE →



Healthy Food Pantry Assessment Tool

B.4. Canned and Dried Fruits, Vegetables, and Lean Protein

Score
(Write
Answer)

31. **Are MOST of the CANNED vegetables labeled as “low-sodium” or “no salt added” on the day of the Pantry visit?**

No Low-Sodium <i>(None of cans are marked as low-sodium)</i>	Some Low-Sodium <i>(Less than 50% of cans are marked low-sodium)</i>	Most Low-Sodium <i>(50% of cans or more are low-sodium)</i>	ALL Low-Sodium <i>(ALL cans are labeled as low-sodium)</i>
0	1	2	3

32. **Are MOST of the CANNED fruits labeled as “low-sugar,” “no sugar added,” or “canned in own juice” on the day of the Pantry visit?**

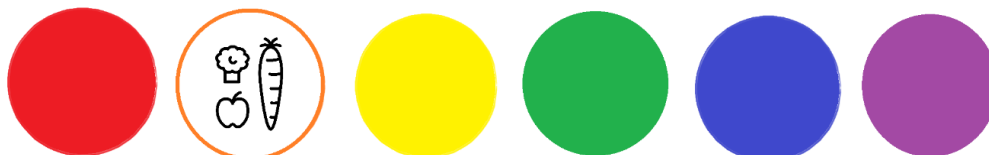
No Low-Sugar <i>(None of cans are marked as low-sugar)</i>	Some Low-Sugar <i>(Less than 50% of cans are marked low-sugar)</i>	Most Low-Sugar <i>(50% of cans or more are low-sugar)</i>	ALL Low-Sugar <i>(ALL cans are labeled as low-sugar)</i>
0	1	2	3

33. **What is the overall VARIETY of dried or canned lean proteins available to clients on the day of the Pantry visit?** *Select the best option that corresponds to lean proteins available.*

No Variety <i>(None Available)</i>	Limited <i>(Only Dried Beans or Lentils)</i>	Moderate <i>(Dried Beans, Lentils, & Low-fat Peanut Butter)</i>	Wide Variety <i>(Beans, Lentils, Low-fat Peanut Butter AND Tuna canned in water)</i>
0	1	2	3

B.4. Subtotal Canned and Dried Fruits, Vegetables and Lean Protein

#31-33 Subtotal HERE→



Healthy Food Pantry Assessment Tool

B.5. Low-Fat Dairy, Eggs, and Grains

Low-fat Dairy items: these are items that are milk or soy based and meet ALL the following criteria:

- Contain 7+ grams of protein per 1 cup (or 8 oz) serving
- Contain less than 5 grams of total fat per 1 cup (or 8 oz) serving
- Contain at least 300 mg of calcium per 1 cup (or 8 oz) serving

Count as Low-fat Dairy products:

- Fat-free milk, any kind (canned, dried, fluid, etc)
- 1% fat milk, any kind
- Low-fat kefir
- Fat-free yogurt
- Low-fat cottage cheese
- Fat-free cottage cheese
- Low-fat cheese
- Fat-free cheese
- Soy milk
- Low-fat yogurt

Score
(Write Answer)

34. **What is the overall VARIETY of low-fat dairy items?** Choose variety based on the criteria above. Please note, variety types are different for low-fat dairy products.

None Available	Limited 1-2 types	Moderate 3-4 types	Wide Variety 5+ types
0	1	2	3

35. **What kind of eggs are available to clients on the day of the Pantry visit?** This includes whole, fresh, powdered, or fluid packaged eggs. Select the best option that corresponds to the eggs available.

None Available	Only Powered or Dry Eggs	Powered AND Fluid packaged eggs	Whole, fresh eggs, or any other type
0	1	2	3

Count items as refined or single grain (intact grain in bulk form). 1 type of grain counts as a packaged product or a whole grain. Do NOT count pastries, cookies, cakes, cupcakes, or grain items with over 10 grams of sugar per single serving. This will likely exclude many processed cereals, especially “children’s cereals.”

Single Grain Examples

- Quinoa
- Bulgur wheat
- Popcorn
- Oatmeal
- Rice
- Barley

Refined Grain Examples

- Sliced bread
- Tortillas
- Pasta
- Muffins and bagels
- Cereals
- Crackers

36. **What is the overall VARIETY of grain items (examples above) on the day of the Pantry visit?** Do NOT count pastries, cookies, cakes and sugary grain items.

None Available	Limited 1-3 types	Moderate 4-6 types	Wide variety 7+ types
0	1	2	3

**Skip to next page*

37. **Of the grain items (examples above) what is the availability of WHOLE GRAIN products on the day of the Pantry visit?**

None Available (None of the grain items are whole grain; all grains are “white”)	Some Whole Grain (Less than 50% of grain products are whole grain)	Most Whole Grain (More than 50% of grain products are whole grain)	ALL Whole Grains (Over 90% of all total grain products are whole)
0	1	2	3

B.5. Subtotal Low-fat Dairy, Eggs, and Grains

#34 - 37 Subtotal HERE →

Healthy Food Pantry Assessment Tool

- B.1. Subtotal Food Distribution to Clients (page 3) →
- B.2. Subtotal Fresh Fruits and Vegetables (page 4) →
- B.3. Subtotal Frozen Fruits, Vegetables, and Lean Protein (page 5) →
- B.4. Subtotal Canned & Dried Fruits, Vegetables, and Lean Protein (page 6) →
- B.5. Subtotal Low-Fat Dairy, Eggs, and Grains (page 7) →

B. Food Available to Clients TOTAL

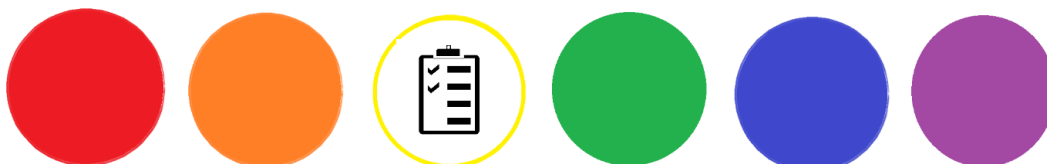
Section B Total HERE →

C. Policies of the Food Pantry

			Score (Write Answer)				
38.	Does the Pantry have <u>documented</u> Nutritional Guidelines for food brought IN to the Pantry? <i>Examples include procurement policies with recommendations on low-sodium items, high protein foods, or avoiding bringing candy or soda pop into the Pantry.</i>	<table border="1" style="width: 100%; text-align: center;"> <tr><td>No</td><td>Yes</td></tr> <tr><td>0</td><td>2</td></tr> </table>	No	Yes	0	2	
No	Yes						
0	2						
39.	Does the Pantry have <u>documented</u> Nutritional Guidelines for food given OUT by the Pantry to clients? <i>Examples include food distribution to clients: policies that ensure every client gets a food from the MyPlate food groups or not sending candy or sweets home with clients.</i>	<table border="1" style="width: 100%; text-align: center;"> <tr><td>No</td><td>Yes</td></tr> <tr><td>0</td><td>2</td></tr> </table>	No	Yes	0	2	
No	Yes						
0	2						
40.	Does the Pantry host healthy food drives in the community (this can include Food Sense supported food drives, milk drives with local grocery stores, etc.)?	<table border="1" style="width: 100%; text-align: center;"> <tr><td>No</td><td>Yes</td></tr> <tr><td>0</td><td>2</td></tr> </table>	No	Yes	0	2	
No	Yes						
0	2						
41.	Does the Pantry allow Food Sense to train their staff and volunteers about the Thumbs Up for Healthy Choices Program?	<table border="1" style="width: 100%; text-align: center;"> <tr><td>No</td><td>Yes</td></tr> <tr><td>0</td><td>2</td></tr> </table>	No	Yes	0	2	
No	Yes						
0	2						
42.	Is Food Safety Training a <u>documented</u> requirement for Staff or Volunteers who have leadership positions?	<table border="1" style="width: 100%; text-align: center;"> <tr><td>No</td><td>Yes</td></tr> <tr><td>0</td><td>2</td></tr> </table>	No	Yes	0	2	
No	Yes						
0	2						
43.	Is Food Safety Training a <u>documented</u> requirement for Volunteers that do not have leadership positions within the Pantry?	<table border="1" style="width: 100%; text-align: center;"> <tr><td>No</td><td>Yes</td></tr> <tr><td>0</td><td>2</td></tr> </table>	No	Yes	0	2	
No	Yes						
0	2						

C. Policies of the Food Pantry

#38 - 43 Section C Total →



Healthy Food Pantry Assessment Tool

D.1 Food Safety, Frozen, Chilled and Dry Storage - Storage

44. Does the Pantry have FROZEN storage available for foods? <i>If the answer for #26 was No, this is No.</i>	No	Yes	Score (Write Answer)
	0	1	

**if No is selected skip to #47*

45. **If yes, please record temperature.** *If more than one frozen storage, record the temperature for the unit where MOST of the food for clients is stored.*
 Record temperature: _____

46. **Please select the following types of FREEZERS the Pantry has available for food storage.** *Include off-site units and list the number of units. Choose ALL that apply.*

- Household freezer & refrigerator combination # of units: _____
- Single door household freezer, standing upright # of units: _____
- Chest or “deer” freezer, including “mini-freezer” # of units: _____
- Single door commercial reach-in freezer, includes display freezer # of units: _____
- Double door commercial reach-in freezer, includes display freezer # of units: _____
- Multi door (3+ doors) commercial and display reach-in freezer # of units: _____
- Large walk-in commercial freezer, including very large “drive-in freezer” # of units: _____
- Other freezer, please specify: _____

47. **Does the Pantry have REFRIGERATED/ CHILLED storage available for foods?**

No	Yes	
0	1	

**If No is selected skip to #50*

48. **If yes, please record temperature.** *If more than one refrigerated/ chilled storage, record the temperature for the unit where MOST of the food for clients is stored.*
 Record the temperature: _____

49. **Please select the following types of REFRIGERATORS the Pantry has available for food storage.** *Include off-site units and list the number of units. Choose ALL that apply.*

Do NOT double count household freezer & refrigerator combination

- Single door household refrigerator, standing upright # of units: _____
- Mini-fridge or “dorm” fridge # of units: _____
- Single door commercial reach-in refrigerator, includes display cooler # of units: _____
- Double door commercial reach-in refrigerator, includes display cooler # of units: _____
- Multi door (3+ doors) commercial and display reach-in refrigerator # of units: _____
- Large walk-in commercial cooler, including very large “drive-in freezer” # of units: _____
- Other refrigerator, please specify: _____

50. **What is the approximate square footage of ALL dry storage space available to the Pantry?** *This question is NOT scored.*
 Square Footage: _____

51. **Please describe dry storage space.** *This question is NOT scored.*

D.1. Storage Subtotal

Score #44 and 47 ONLY HERE →

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Healthy Food Pantry Assessment Tool

D.2. Food Safety

52. Is there a thermometer or thermostat in the Dry Storage area? <i>If no, Skip to #54</i>			Score <i>(Write Answer)</i>
	No	Yes	
	0	1	

53. **Record the temperature of the thermometer or thermostat in dry storage and select the appropriate score.**

Record temperature: _____

Less than 43 degrees F or More than 83 degrees F	Between 43-83 degrees F	
0	1	

54. **Are hand washing signs displayed above sinks?**

No Hand Washing Signs	Some Hand Washing Signs	ALL Sinks have Hand Washing Signs Displayed	
0	1	2	

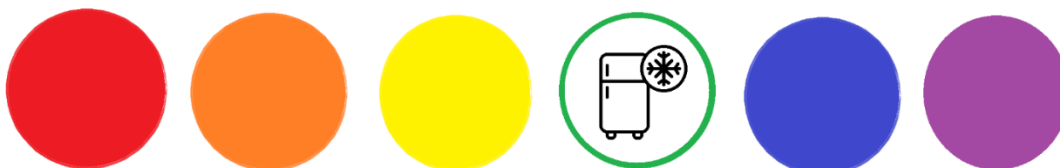
55. **How clean and clear is the area where food is brought into the Pantry?**

Dirty and Cluttered <i>(Visible dirt; pathways unclear or blocked)</i>	Clean but Cluttered <i>(No visible dirt; pathways unclear or blocked)</i>	Clean and Clear <i>(No visible dirt; pathways are clear and no blockages)</i>	
0	1	2	

56. **What kind of transportation equipment is available for use by the Pantry?**

Only Private Transportation <i>(There is no transportation in use except for personal, volunteer vehicles)</i>	Shared Vehicle or Food Bank Distributor Vehicle <i>(There is at least one vehicle, not privately owned, can be shared among agencies)</i>	Pantry or Agency Owned Vehicle in Use <i>(The Pantry or agency owns and holds insurance for a vehicle dedicated for food)</i>	
0	1	2	

D.1. Frozen, Chilled and Dry Storage	#44 and 47 (page 9) Subtotal HERE →	
D.2. Food Safety	#52 - 56 Subtotal HERE →	
	Section D Total →	



Healthy Food Pantry Assessment Tool

E. Services

57. Does the Pantry host Food Sense nutrition classes on site?

Score
(Write
Answer)

No	Yes	
0	2	

58. Does the Pantry host Food Sense nutrition education booths, recipe sampling, or other forms of indirect education?

No	Yes	
0	2	

59. Does the Pantry have the Thumbs Up for Healthy Choices program?

No	Yes	
0	2	

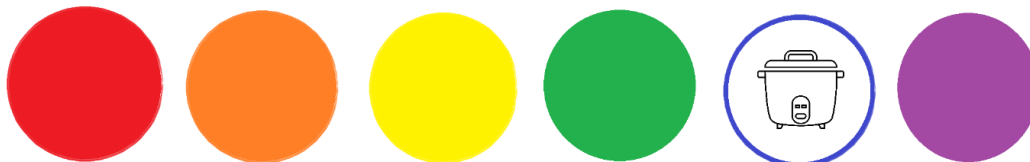
E. Services

#57 - 59 Subtotal HERE →

F. Other Supplementary Programs

The following programs are not scored; they are supplementary programs that may be present at the Food Pantry. Information on these programs may be found elsewhere. Select No or Yes.

	No ▼	Yes ▼
60. Does the Pantry participate in a “BackPack Program” where food is given to children in school bags?	<input type="checkbox"/>	<input type="checkbox"/>
61. Does the Pantry participate in/ receive reimbursement for Federal Child Nutrition Programs, such as Summer Meals, CACFP, etc.?	<input type="checkbox"/>	<input type="checkbox"/>
62. Does the Pantry have a Registered Dietitian or Nutritionist on Staff or one that regularly volunteers?	<input type="checkbox"/>	<input type="checkbox"/>
63. Does the Pantry offer nutritional training to staff or volunteers regarding the USDA MyPlate food groups or serving sizes of foods?	<input type="checkbox"/>	<input type="checkbox"/>
64. Does the Pantry have a Mobile or School Pantry that is off-site in operation? (May be in partnerships with larger-member food bank/ distributor.)	<input type="checkbox"/>	<input type="checkbox"/>
65. Does the Pantry offer home delivery of foods or hot meals?	<input type="checkbox"/>	<input type="checkbox"/>
66. Does the Pantry provide hot meals on site?	<input type="checkbox"/>	<input type="checkbox"/>
67. Does the Pantry have specialty food items such as gluten-free or baby foods?	<input type="checkbox"/>	<input type="checkbox"/>
68. Does the Pantry sponsor or demonstrate Volunteer Appreciation or Awards for service?	<input type="checkbox"/>	<input type="checkbox"/>



Healthy Food Pantry Assessment Tool

69. What comments would you like to share about your Food Pantry environment? Please use the space provided below. This question is not scored.

Assessment Summary Score

A. A. Pantry Location & Entrance	
A.1. Subtotal (page 2, #1-13).....	<input style="width: 100px; height: 20px;" type="text"/>
<i>*Remember to subtract the Walkability Checklist score from A.1. Subtotal</i>	
B. Food Available to Clients	
B.1. Subtotal Food Distribution to Clients (page 3, #14-19).....	<input style="width: 100px; height: 20px;" type="text"/>
B.2. Subtotal Fresh Fruits and Vegetables (page 4, #20-25)	<input style="width: 100px; height: 20px;" type="text"/>
B.3. Subtotal Frozen Fruits, Vegetables, and Fresh/ Frozen Lean Protein (page 5, #27-30).....	<input style="width: 100px; height: 20px;" type="text"/>
B.4. Subtotal Canned Fruits, Vegetables, and Lean Protein (page 6, #31-33)	<input style="width: 100px; height: 20px;" type="text"/>
B.5. Subtotal Low-Fat Dairy, Eggs, and Grains (page 7, #34-37).....	<input style="width: 100px; height: 20px;" type="text"/>
B. Food Available to Clients Subtotal, page 8.....	<input style="width: 100px; height: 20px; text-align: center; border: 1px solid black;" type="text" value="+"/> +
C. Policies of the Food Pantry	
C.1. Subtotal (page 8, #38-43).....	<input style="width: 100px; height: 20px;" type="text"/>
D. Frozen, Chilled, Dry Storage, and Food Safety	
D.1. Subtotal Storage, (page 9, #44 and #47 ONLY).....	<input style="width: 100px; height: 20px;" type="text"/>
D.2. Subtotal Food Safety (page 10, #52-56)	<input style="width: 100px; height: 20px;" type="text"/>
D. Frozen, Chilled, Dry Storage and Food Safety Subtotal, page 10	<input style="width: 100px; height: 20px; text-align: center; border: 1px solid black;" type="text" value="+"/> +
E. Services for Clients	
E.1. Subtotal (page 11, #57-59)	<input style="width: 100px; height: 20px;" type="text"/>
	=
Healthy Pantry Assessment Score – GRAND TOTAL	<input style="width: 100px; height: 20px;" type="text"/>
<i>ADD Subtotals A, B, C, D, & E together, Score should be 1-100.</i>	

