



Affiliates must ensure that all home supply items and food and/or food allowance are provided upon arrival. When completing this form, list the specific quantities provided; check marks or "enough" are not acceptable responses.

<b>PA Name:</b>		<b>Case #:</b>	<b>List Completed by:</b>	
<b>Other Adult Members:</b>			<b>DOA:</b>	<b>Date Conducted:</b>
<b>Case Size:</b>	<b># of Occupants:</b>	<b># of Bedrooms:</b>	<b>Temporary (T) or Permanent (P) Housing:</b>	
<b>Address:</b>				

<b>A. Furniture</b>	<b>Quantity</b>	<b>B. Kitchen Items</b>	<b>Quantity</b>
Mattress and box spring (only married couples or small children of same gender may be expected to share beds)		One place setting of tableware (fork, knife, spoon) per person	
Bed frame		One place setting of dishes (plate, bowl and cup) per person	
One set of drawers, shelves or other unit appropriate for storage of clothing per bedroom		Pots and pans: at least one sauce pan, frying pan, and baking dish	
One couch or equivalent seating per family (in addition to kitchen chairs)		Mixing/serving bowls	
One lamp per room, unless installed lighting is present and adequate, and light bulbs as needed		One set of kitchen utensils (such as a spatula, wooden spoon, knife, serving utensils, etc.)	
Kitchen table (per case) and chair (per person)		Can opener	
<i>Note any additional furniture and kitchen items provided for family</i>			

<b>C. Linens and Other Household Supplies</b>	<b>Quantity</b>	<b>D. Toiletries (new)</b>	<b>Quantity</b>
One bath towel per person		Toilet paper (list number of rolls)	
One set of sheets for each bed		Shampoo	
Blanket(s) of comforter(s) for each bed		Soap	
One pillow and pillowcase for each person		One toothbrush per person	
Alarm clock (phone is sufficient)		Toothpaste	
Paper, pens, and/or pencils (one set per case recommended)		Personal hygiene items (such as deodorant, feminine hygiene products, and razors)	
<i>Note any additional Linens, Household Supplies, and Toiletries provided for family</i>			

<b>E. Cleaning Supplies</b>	<b>Quantity</b>	<b>F. Baby Items (if applicable)</b>	<b>Quantity</b>
Dish soap		Baby Food	
Bathroom/kitchen cleaner		Clothing	
Laundry detergent		Diapers	
Sponges or cleaning rags and/or paper towels		Car Seat (children under 4 – see state guidelines)	
Waste Baskets (1 kitchen, 1 per bathroom)		Crib (children under 3)	
Trash bags (list number of boxes)			
Mop or broom			
<i>Note any additional Cleaning Supplies and Baby Items provided for family</i>			

<b>G. Other Items and Food</b>	<b>Description</b>
Appropriate clothing for work, school (uniforms if necessary) and everyday use for each family member: <i>Clean clothing, in good condition, for all members of the family (including proper footwear)</i>	
Food available on arrival: <i>Culturally appropriate, ready-to-eat food, plus one day's worth of additional food supplies and staples (including baby food, as needed)</i>	
Food within one day of arrival: <i>Food or food allowance at least equivalent to the SNAP/food stamp allocation for that family unit and continued food assistance until receipt of SNAP/food stamps or until individual/family is able to provide food for themselves</i>	
Additional items appropriate to family size and composition: <i>For example, large families should receive enough cookware to prepare a meal for all individuals; additional plates and utensils may be appropriate for a single individual.</i>	
<i>Note any additional/regional items your office provided for family</i>	

Client Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Client Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Case Manager Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Interpreter Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_