E-Signature Instruction Process

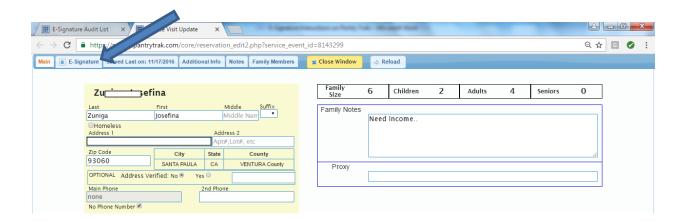
If client <u>IS NOT</u> receiving USDA commodities but is taking all other pantry food products be sure to click on "NOT REQUIRED" and then "SERVED".



If client <u>IS</u> receiving USDA commodities but is new to your pantry and **IS NOT** in the Pantry Trak system, be sure to have them sign the hard copy EFA-7 sign-in sheet. When entering them into the Pantry Trak system, be sure to confirm that the date matches the date that they signed the EFA-7 sign-in sheet and click on "SIGNED PAPER FORM" and click on "SERVED".



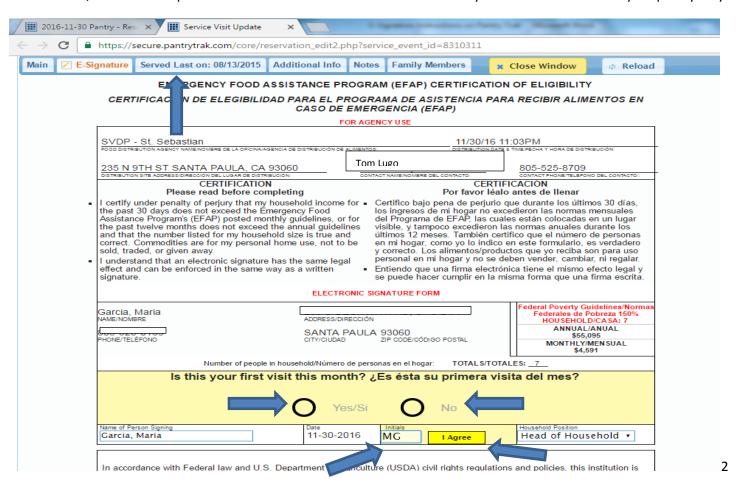
If client IS receiving USDA commodities and is in the Pantry Trak system already, go directly to the top of the clients main card and click on the "E-Signature" tab. There is no need to click on "SERVED" or any other indicator under "HOW DID THEY SIGN?" as the system will automatically record the transaction as "SERVED".



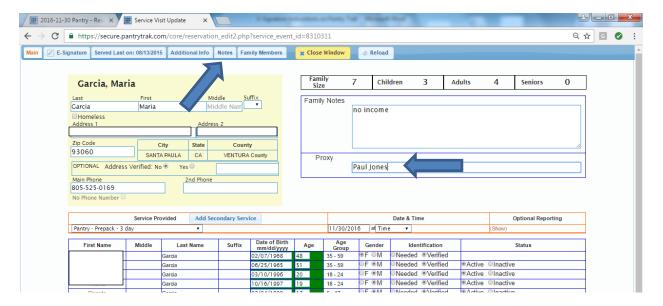
If the recipient has not previously signed via e-signature the USDA disclosure statement acknowledging that "I understand that if I only want to receive USDA Commodities, no further information is required. To receive other food/services provided by this agency, additional information may be required" (see sample attached), this will be the first screen that will appear. Make sure sure that the recipient reads the statement, (we recommend displaying the enlarged printed disclosure statement enclosed next to the computer screen) understands, and then if they choose to continue, have the recipient personally type their initials and direct them to hit the "I Understand" key.

2016-11-30 Pantry - Res	Service Visit Update	×								
\leftarrow \rightarrow $oldsymbol{c}$ $oldsymbol{ ilde{a}}$ https://s	secure.pantrytrak.com/core/r	eservation_edit2.php?	service_event_id=8310311							
Main E-Signature Served Last on: 08/13/2015 Additional Info Notes Family Members Close Window PReload										
Head of Household (HH) Address Line(s) City, State, Zip I understand that if I only want to receive USDA Commodities, no further information is required. To receive other food/services provided by this agency, additional information may be required Yo entiendo que si yo sólo quiero recibir USDA Materias Primas , no se requiere más información . Para recibir										
otros alimentos / sérvicios ofrecidos por esta agencia , se puede requerir información adicional Name of Person Signing Garcia, Maria Date 11-30-2016 MG Understand Household Position Head of Household ▼ EFA 7A (ENG/SP) (3/11) EMERGENCY FOOD ASSISTANCE PROGRAM (Limits Rev. 4/16) NOT VALID PRINTED FORM - E-signature Only										

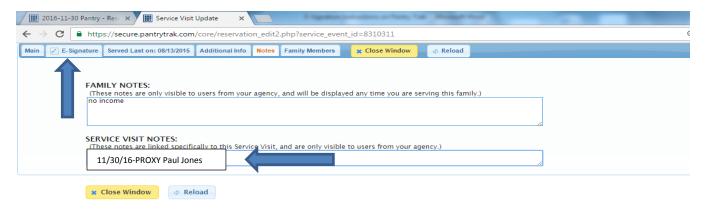
This next screen will appear. Mark the "Yes" or "No" button after the client answers as to whether or not this is their first time receiving any USDA commodities this month and then have them put their initials and press "I AGREE" button. If the client cannot recall if they have been to your pantry previously that same month when you distributed USDA commodities, look on the top tab entitled "SERVED LAST ON:" which will always show their last date at your pantry only.



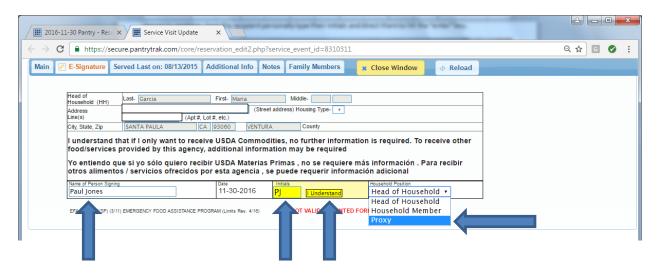
If you have received a signed authorization for pick-up form EFA-15 referred to as a "sapu", first be sure to add that authorized person's name in the "PROXY" section on the client's main card and then click on the "Notes" tab on the top of the client's main card to record the date of receipt. (Remember these EFA-15 must be renewed every 30 days)



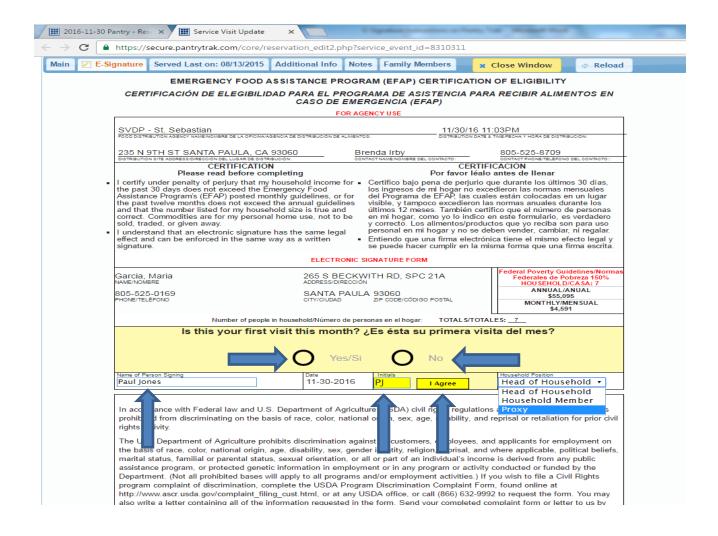
After hitting the "Notes" tab on top, this next screen below will show. Under the "SERVICE VISIT NOTES" put sapu (abbreviation for "SIGNED AUTHORIZATION PICK-UP FORM EFA-15") the date of the authorization form and the name of the Proxy. Remember that all EFA-15 forms must be updated every 30 days). Then click on "E-SIGNATURE"



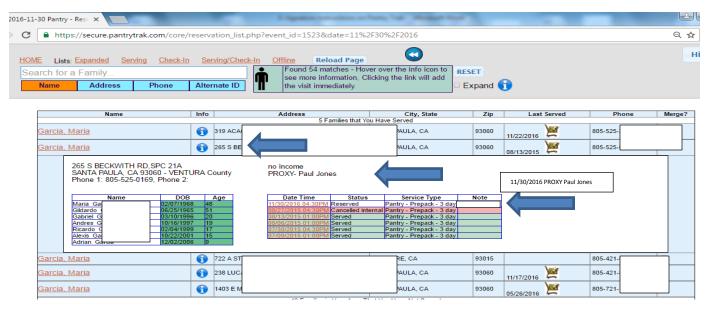
If this is the first time that this client/proxy has been asked to do an e-signature for USDA the disclosure statement will appear and the proxy's name will need to be typed in the "NAME OF PERSON SIGNING" section and under the "Household Position" section use the drop down to click on "PROXY" the proxy must type their initials in the appropriate box and then click on the "I UNDERSTAND" button.



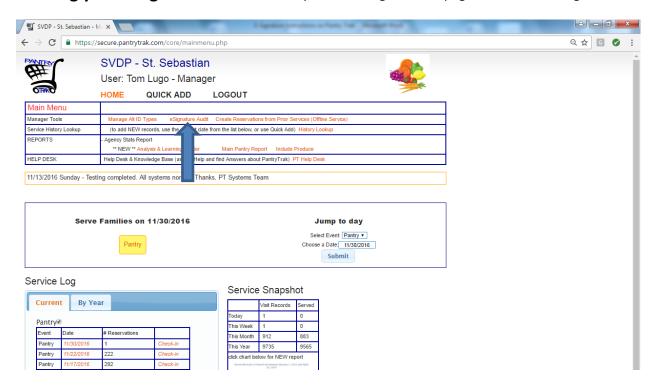
This next screen (seen below) will appear and after clicking on either the "YES" or "NO" question, the Proxy's name will need to be inputted (if not there already), in the "NAME OF PERSON SIGNING" section and under the "Household Position" section use the drop down to click on "PROXY" the proxy must type their initials in the appropriate box (if not there already) and then click on the "I AGREE" button.



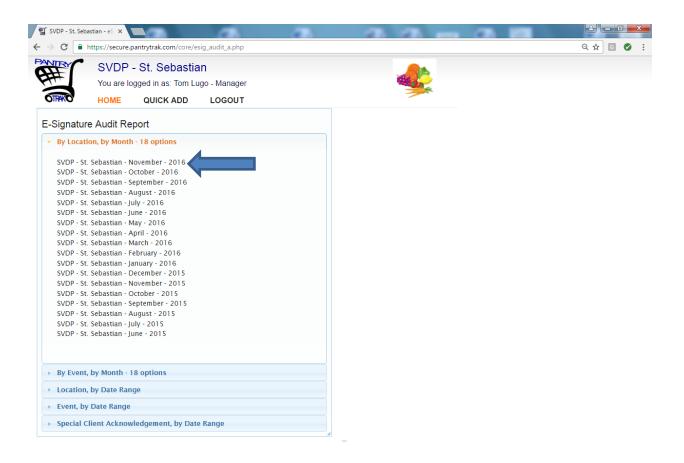
Now, you will be able to immediately see the last date you received an EFA-15 for your client in order to request an updated form when it has expired by just hovering over the blue and white Info icon. See example below



Viewing your e-signature audit. Go to your main organization page and click on "eSignature Audit".



Click on the month you would like to review.



You will be able to review all e-signature information

E-Signature Audit list for 11/01/2016 through 11/30/2016 , SVDP - St. Sebastian

There are 861 service records that were found for this report that have an eSignature

	Service Visit #	Head of Household	Address City, Zip	Phone	Kids, Adults, Seniors, Total	Service Received	Form Type	Signed By	Signature Initials	Household Position	Income Limits	First Service this Month	Signed on:	Audit View
016- 1-10	8047628			805-525- 4310	1 + 4 + 0 = 5	Pantry - Prepack - 3 day	25			head of household	42660 3555	yes	2016- 11-10 17:14:53	8047628
016- 1-10	8045780	name (State	AI RD , SANTA PAULA 93060	None	3 + 2 + 0 = 5	Pantry - Prepack - 3 day	25			head of household	42660 3555	yes	2016- 11-10 16:17:43	8045780
016- 1-22	<u>8259075</u> .	took tood	S BECKWITH RD SANTA PAULA 93060	None	2 + 4 + 0 = 6	Pantry - Prepack - 3 day	25	Scottle, Statelli		head of household	48870 4072.	50No	2016- 11-22 18:44:17	<u>8259075</u>
016- 1-03	<u>7972227</u> /	took tood	S BECKWITH RD SANTA PAULA 93060	None	2 + 4 + 0 = 6	Pantry - Prepack - 3 day	25			head of household	48870 4072.	50yes	2016- 11-03 19:20:17	<u>7972227</u>
016- 1-10	<u>8049279</u> ,		S BECKWITH RD SANTA PAULA 93060	None	2 + 4 + 0 = 6	Pantry - Prepack - 3 day	25	North Years		head of household	48870 4072.	50No	2016- 11-10 18:36:06	
016- 1-17	<u>8144931</u> /		S BECKWITH RD SANTA PAULA 93060	None	2 + 4 + 0 = 6	Pantry - Prepack - 3 day	25	booth, frank		head of household	48870 4072.	50No	2016- 11-17 18:32:41	8144931
			100 1 170 100										2016	

As long as the Proxy is selected during the E-Signature process, this will be reflected in the Household Position column of the Audit.

E-Signature Audit list for 09/01/2016 through 09/30/2016, California Food Banks

There are 4 service records that were found for this report that have an eSignature

Date of Service	Service Visit#	Head of Household	Address City, Zip	Phone	Kids, Adults, Seniors, Total	Service Received	Form Type	Signed By	Signature Initials	Household Position	
2016-09- 20	<u>823360</u>	James, Jame	James Way WEST SALEM 44287	None	0 + 1 + 0 = 1	Pantry - Choice - 3 day	25	James, Jame	JJ	proxy	
2016-09- 21	823296	Mollenkopf, Mark	SIREEI Redrock 88802		0+1+1=4	Pantry - Choice - 3 day	25	Mollenkopf, Mark	IIVIIVI	head of household	6
2016-09- 21	823365	i illice, Dialia	1942 AMAZON CTD Bedford Falls 88801	614-555- 8327	0+2+0=2	Pantry - Choice - 3 day	25	Rogers, Steve	SR	proxy :	1
2016-09- 20	<u>823361</u>	Rice, Teriyaki	2400 Bean Street CAMARILLO 93010	None	11 + 1 + 11 = 1	Pantry - Choice - 3 day	25	Rice, Teriyaki	IIR I	head of household	į

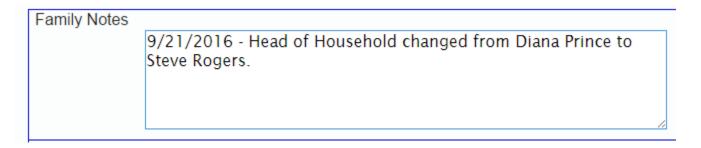
Using Service Notes would accomplish your updates and still be easily accessible when you hover over the Service Visit # in the Audit.

E-Signature Audit list for 09/01/2016 through 09/30/2016, California Food Banks

There are 4 service records that were found for this report that have an eSignature

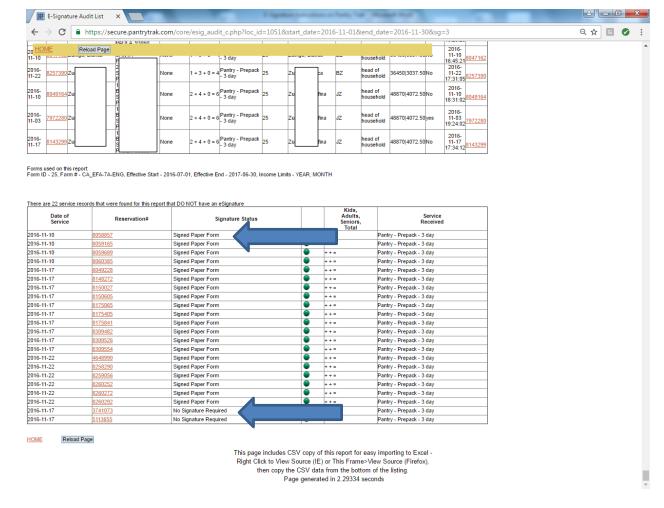
Date of Service	Service Visit#	Head of Household	Address City, Zip	Phone	e Ad	ids, lults, niors, otal		Service Received	Form Type	Signed By	Signature Initials	Н
2016-09- 20	<u>823360</u>		James Way WEST SALEM 44287	None	0 + 1	+ 0 = 1	Pantr 3 day	y - Choice -	25	James, Jame	JJ	prox
2016-09- 21	823296	Mollenkopf, Mark	5791 SOME STREET Bedrock 88802	555-555 1212	0 + 1	+ 1 = 4	Pantr 3 day	y - Choice -	25	Mollenkopf, Mark	ММ	hea hou
2016-09-	022205		1942 AMAZON CTE)								
21	823365	Prince, Diar	na									
2016-09- 20	<u>823361</u>		CTD, - Bedford Falls, F nty - Phone1: 614-555-			OXY-St	eve Ro	gers				
		1	Name	DOB	Age							
	H-:-	Diana Princ	e 07	7/07/1992	23							
Forms use Form ID - 2		1 Isleve Rode	rs 07	7/12/1988	28							
FUIII ID - 2	25, FUIIII	#			Date	Sta	atus	Service	Туре	No	tes	
				0	9/21/201	6 Serv	ed	Pantry - Cho	ice - 3 da	9/21/16	- Steve Ro	gers
				0	06/14/201	6 Rese	erved	Pantry - Cho	ice - 3 da			

Finally, just to clarify: the **only** thing other pantries see in the Notes section are the system global messages. In keeping with our Diana Prince example, if Steve Rogers changed from just a Proxy to moving in and becoming Head Of Household, every agency would see the following system message:



There's a similar message when family changes or updates occur as well.

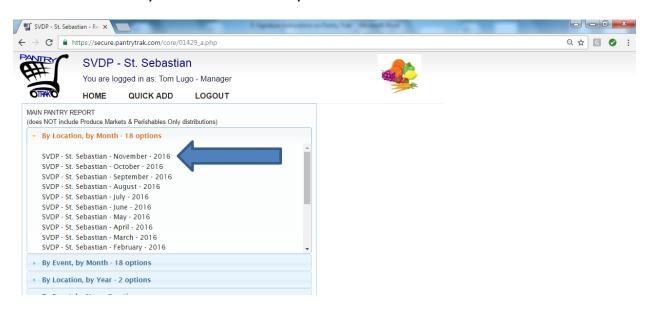
The bottom of your e-signature audit will show all of your new USDA recipients that signed the hard copy of the EFA-7 sign-in sheet for that month indicated with the term "Signed Paper Form". These should match those who signed and whose original EFA-7 sign-in sheet SHOULD STILL BE TURNED IN AT THE END OF THE MONTH WITH YOUR USDA MONTHLY COVER SHEET. Under the "Signature Status", if you see the term "No Signature Required", these are clients who chose NOT TO COLLECT USDA products and only took the other food products that your pantry offered. This rarely occurs, however you WILL NOT find their names on the manually signed EFA-7 sign-in sheet.



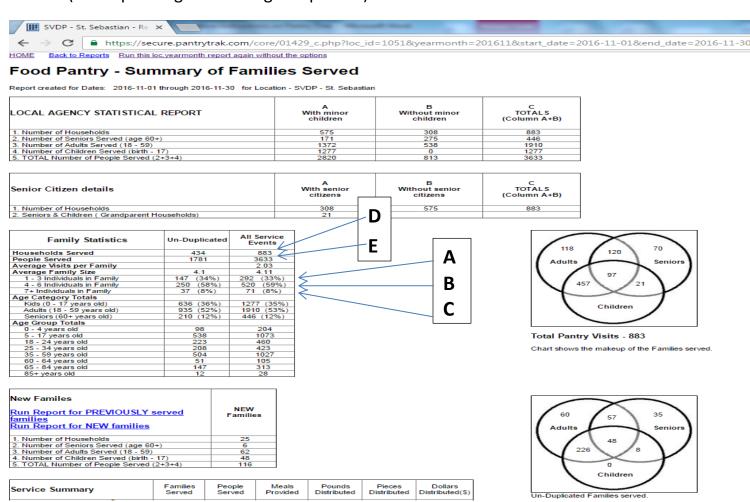
To complete your monthly cover sheet totals go to your organization's main page and click on "Main Pantry Report"



Select the month you need to obtain your numbers from



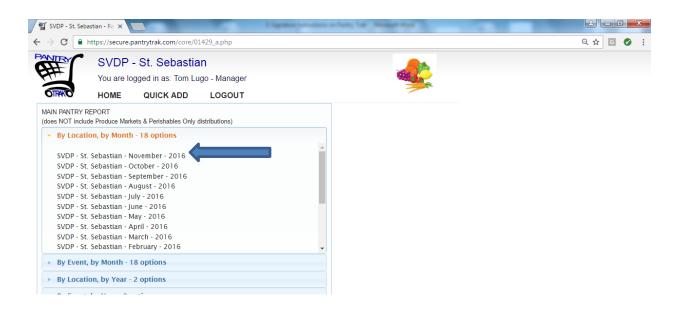
You can obtain the numbers to complete your monthly USDA cover sheet by looking at each section (corresponding with enlarged alphabet) see next screen

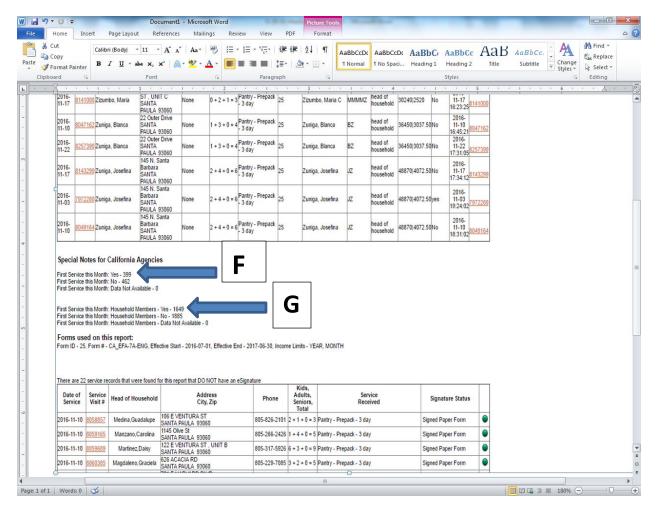


To obtain the totals for sections **F** & **G** go back to the "Home" page and select "eSignature Audit"



Select the same month that you want to obtain the information from







Daytime Phone Number _

FOOD Share, Inc.

USDA Monthly Report Due the 5th of each month

Fax Completed Form to 805-604-1542 Attn: Agency Relations

PLEASE PRINT!

Report for the Month of ______ YEAR:_____

Name of Agency	Agency Account # \mathbf{US}
Name of Person Completing Report	

Section B

USDA Agencies complete this section

	OSDA Agencies complete this section							
Α	В	С	D	E	F	O		
# of Small Families (1-3)	# of Med Families (4-6)	# of Large Families (7+)	Total # of Households (A+B+C)	Total # of all People (aka individuals, family members)	Total # of New Households (# of "YES")	Total # of New "Yes" Household Members (# family members of "YES")		
292	520	71	883	3633	299	1649		