



DCP - Capital Area Food Bank  
 4900 Puerto Rico Ave. NE  
 Washington, DC 20017  
 Tel: (202) 644-9845 /  
 9858  
 Email:

Fax: (202) 529-1767

Agency No: 9728-02

Phone#: (202)489-3289

Invoice No: 455370

Frederick Gaskins  
 Bethel Stand for Life Outreach Ministries  
 4814 St. Barnabas Road  
 Temple Hills MD 20748

Intake Clerk: Idavis-POLO  
 Order Date: 11/02/2016  
 Pickup Date: 11/14/2016  
 Pickup Time: 9:00 am

Ship Via: Pick-Up

Pickup Order:: Location:: DC2

Message to food bank: .

This was submitted on 11/2/2016 2:42 PM by 972802. Contact Name: FREDERICK GASKINS Phone: 2024893289 Email: frederick.gaskins@gmail.com

Product Reference	Description	Storage	Quantity	---W e i g h t---		Shared Maintenance		---- C o s t ----	
				Unit	Total	/Lb	Total	Unit	Total
<b>Donated Products</b>									
703153	\$1.00 Shoppers Bags	Dry	15	5.26	79	\$0.19	\$14.98	\$0.00	\$0.00
882626	*Donated Assorted Spices	Dry	1	22.25	22	\$0.19	\$4.23	\$0.00	\$0.00
			16		101		\$19.21		\$0.00
<b>F. &amp; V. Fund/Seasonal Purch.</b>									
704998	F&V Apples	Refrig	110	1.00	110	\$0.00	\$0.00	\$0.00	\$0.00
705453	F&V Greens	Refrig	40	1.00	40	\$0.00	\$0.00	\$0.00	\$0.00
			150		150		\$0.00		\$0.00
<b>Produce - Donated SMF</b>									
704710	Carrots, Donated SMF	Refrig	150	1.00	150	\$0.00	\$0.00	\$0.00	\$0.00
704711	Onions, Donated SMF	Dry	550	1.00	550	\$0.00	\$0.00	\$0.00	\$0.00
			700		700		\$0.00		\$0.00
<b>Produce - Purchased</b>									
702753	Broccoli	Refrig	98	1.00	98	\$0.00	\$0.00	\$0.00	\$0.00
			98		98		\$0.00		\$0.00
<b>Purchased Products</b>									
705402	Corn Muffin Mix	Dry	1	9.50	10	\$0.00	\$0.00	\$8.97	\$8.97
705555	CAFB Recipe Cards	Dry	2	10.00	20	\$0.00	\$0.00	\$0.00	\$0.00
706185	Yams, Cut (Sweet Potatoes)	Dry	2	11.25	23	\$0.00	\$0.00	\$8.51	\$17.02
			5		52		\$0.00		\$25.99
<b>Invoice Totals:</b>			969		1,101		\$19.21		\$25.99

TOTAL CHARGES: \$45.20

Amount Owed: \$45.20

Cash & Carry: Payment is due at time of delivery/pickup.

Available Grants as of 11/14/2016

GrantRef GrantName Balance



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				Unit	Total	/Lb	Total	Unit	Total

Agency Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Signature: \_\_\_\_\_

Invoice Message:

2/15/2017 10:29:33 AM