



# ORGANIZATION QUESTIONNAIRE PACKET

This packet contains the following:

- Introductory Letter
- Frequently Asked Questions
- Outreach Questionnaire

Please include the following:

- Copy of Current 501(c)3
- Copy of valid State of Florida Incorporation Receipt (available at [www.sunbiz.org](http://www.sunbiz.org))
- Statement of Faith and/or Mission Statement



Dear Applicant,

Thank you for your interest in partnering with Southeastern Food Bank, a division of Bread of Life Fellowship, Inc. If you haven't done so already, please visit our website at [www.southeasternfoodbank.com](http://www.southeasternfoodbank.com). As a reminder, please include a copy of both the IRS 501(c)3 Determination letter and Sunbiz registration receipt when submitting.

Once the questionnaire is completed, please submit it for review via one of the following:

1. Fax: (407) 654-8724; please include a cover letter stating the name of the Organization and the individual sending it.
2. Mail: Southeastern Food Bank, c/o Outreach Coordinator, P. O. Box 770009, Winter Garden, FL 34777.
3. Email: [outreachcoordinatorBOLF@gmail.com](mailto:outreachcoordinatorBOLF@gmail.com); please include "2018 Questionnaire" along with name of the Organization in the subject line.

Due to the number of organizations requesting assistance from us, we ask that all applicants remain patient. It takes an average of one to two weeks from the day the questionnaire is submitted for it to be reviewed, after which our Outreach Coordinator will contact your organization to follow up. If you have any questions, please feel free to contact us.

Once again thank you for your interest in partnering with Southeastern Food Bank / Bread of Life Fellowship, Inc. to help those in your community; it is only through cooperation with other organizations such as yourself that we can continue "caring for those in need by sharing life's necessities and a message of hope".

In Christ's Service,

Outreach Coordination Department

Southeastern Food Bank,  
a Division of Bread of Life Fellowship, Inc.



Thank you for contacting Southeastern Food Bank (SEFB) / Bread of Life Fellowship (BOLF). Please review our Frequently Asked Questions (FAQ's) and complete the attached questionnaire.

1. What types of Organizations can apply to partner with SEFB/BOLF?

SEFB/BOLF welcomes both faith and non-faith based Organizations that have a current 501(c)(3) status as well as an active non-profit registration with the state of Florida Division of Corporations to apply. We ask that the Questionnaire be filled out by an individual that is listed on the Organizations registration, or provide a letter from the Organization authorizing whomever is to fill it out on their behalf. SEFB/BOLF requires those with 501(c)(3)'s from out of state to mail an authorization letter to our Office from the address listed on the Tax Exemption Letter.

2. How does a 501(c)(3) Organization receive product from SEFB/BOLF?

All potential partners go through an application process that begins with the Outreach Questionnaire. Our Outreach Coordination Department then reviews the Questionnaire and will notify the Organization whether they have been accepted to continue.

3. Is SEFB/BOLF a place where 501(c)(3) Organizations can go to select items for their program? No. SEFB/BOLF assists Organizations by supplying whatever product is available that month; our warehouse personnel then puts that product onto a pallet and it is given to the Organization. To ensure there is enough to share with all our partners, SEFB/BOLF will only support one specific outreach per Organization once a month (or per quarter, when applicable) no matter the actual frequency of the outreach (i.e. once a week/twice a month).

4. Does SEFB/BOLF charge for the product that is picked up at its warehouse?

SEFB/BOLF does not require compensation of any kind from Organizations that receive from us. However, we encourage Organizations to sow into SEFB/BOLF. Each gift, no matter how large or small, allows SEFB/BOLF to continue to operate and reach economically disadvantaged families across the southeast, sharing a message of hope with each encounter.

5. How do approved Organizations pick up product from SEFB/BOLF?

SEFB/BOLF works by appointment only; details on how to schedule an appointment are provided further along in the application process.

6. How long do Organizations stay registered with SEFB/BOLF?

Organizations are reviewed every January and sent a new application if selected by SEFB/BOLF to continue.

## **Southeastern Food Bank (SEFB) Outreach Questionnaire:**

1. How/From whom did you hear about SEFB? (individual & organization) \_\_\_\_\_
2. Do you have a contract with any Food Bank? \_\_\_\_\_ If Yes, with whom? \_\_\_\_\_
3. Do you receive USDA/United Way funding or product? \_\_\_\_\_
4. Do you have other sources of product donations other than SEFB? \_\_\_\_\_ If yes, from where? \_\_\_\_\_
  
5. Where will product be stored (on-site organization storage/off-site personal storage)? \_\_\_\_\_
6. Is this a new outreach? \_\_\_\_ If no, how long has the program been operating and where did you previously obtain your product? \_\_\_\_\_
7. What is required of those receiving food (donation, photo ID, proof of income, etc.)? \_\_\_\_\_
8. How many individuals/families do you plan to serve per outreach? \_\_\_\_\_ (Indicate 'Individ.' or 'fam.')
9. Describe the outreach (groceries, prepared meals, etc.) and its frequency (weekly/bi-monthly/monthly):  
\_\_\_\_\_  
\_\_\_\_\_
  
10. What percentage of product will be used for outreach versus helping those inside your organization/congregation (Ex: 75% outreach, 25% within)? \_\_\_\_\_
11. Will program present the Gospel? \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Only Upon Request
12. If yes to question #11, how many volunteers are available to *share/pray*? \_\_\_\_\_
13. How many *additional volunteers* will assist the outreach? \_\_\_\_\_
14. Would your Organization be willing to donate to aid in SEFB's mission? \_\_\_\_\_
15. If yes, how often (monthly, quarterly, special collection, etc.)? \_\_\_\_\_

**501 (c)(3) Organization Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_ Facebook: \_\_\_\_\_

**I have read and understand SEFB's FAQ's (please initial):** \_\_\_\_\_ **Date Submitted:** \_\_\_\_\_