



To be completed by HOME staff

Client name _____
 Referral agency _____
 Adults: _____ Children: _____
 Distribution Date _____

HOME Distribution form

Category	Qty	Group	Description	Loaded
Household Items		Serving	Plates and glasses	
		Cutlery	Knives, forks, spoons	
		P&P	Pots, pans, cookware	
		Serving	Serving utensils and butcher knives	
		Bath	Bath Towels, Hand Towels & Washcloths	
		Bath	Shower curtains and toiletries	
Beds		Frame	Circle given: ___ Twin ___ Full ___ Queen	
		Mattress	Circle given: ___ Twin ___ Full ___ Queen	
		Box Spr	Circle given: ___ Twin ___ Full ___ Queen	
		Linen	Circle given: ___ Twin ___ Full ___ Queen	
Seating		Kitchen	_____ Chairs ___ Stools _____ Table	
		Lvg Room	_____ Chairs ___ Couch ___ Futon	
Assorted Furniture		Tables	Description	
		Lamps	Description	
		Shelves	Description	
		Dresser	Description	
Appliances		Microwave		
		Small	Description	
		Large	Description	
		Electronics	Description	
NOTES:				

HOME Staff/ Volunteer: _____