**TEXAS DEPARTMENT OF CRIMINAL JUSTICE Chaplaincy Department**

**CHAPLAINCY MANUAL**

**Policy Number: Page:**

**Date:**

**03.02 (rev. 3) Att. A**

**1 of 1**

**November 2013**

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| **TEXAS DEPARTMENT OF CRIMINAL JUSTICE Food Donation Worksheet** | | | | | | | | | | | | |
| Date | Unit | | | | | Address  AAAAAAA | | | | | | |
|  |  | | | | |  | | | | | | |
| Religious Group: | |  | | | | | Date of Event: | | | |  | |
| Holy Day/ Event: | |  | | | | | Time of Event: | | | |  | |
| Location of Event on Unit: | | | |  | | | | | | | | |
| **Offender Participant Information** | | | | | | | | | | | | |
| General Population: | | |  | | | | | | Total Number of Participants: | | | |
| Administrative Segregation: | | |  | | | | | |
| Close Custody: | | |  | | | | | |  | | | |
| Other: | | |  | | | | | |
| **Donor Information** | | | | | | | | | | | | |
| Volunteer Organization or Ministry Providing Food: | | | | | | | | | | | | |
| Volunteer Name | | | | Last 4 digits of DL# or SID# | | | | | Telephone Number | | | Approved  Volunteer |
| 1- | | | |  | | | | |  | | |  |
| 2- | | | |  | | | | |  | | |  |
| 3- | | | |  | | | | |  | | |  |
| 4- | | | |  | | | | |  | | |  |
| 5- | | | |  | | | | |  | | |  |
| **Food Establishment Information** | | | | | | | | | | | | |
| Restaurant/Supplier | | Address | | | | | | Phone Number | | | Food Establishment  License Number | |
| 1- | |  | | | | | |  | | |  | |
| 2- | |  | | | | | |  | | |  | |
| 3- | |  | | | | | |  | | |  | |
| **Menu** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| **Unit Approval** | | | | | | | | | | | | |
| **Printed Name** | | | | | **Signature** | | | | | **Date** | | |
| Chaplain | | | | |  | | | | |  | | |
| Warden | | | | |  | | | | |  | | |