

LINK2FEED NEW HOUSEHOLD ACCOUNT

- Information collected will only be used for the Link2Feed database within the Oregon Food Bank Network of pantries and remain anonymous to all outside parties.
- This information will not be shared with the government or be used to limit the services you receive. No services will be denied if you choose not to share some or all of this information.

Oregon Food Bank, Marion Polk Food Share and this pantry are an equal opportunity provider.

Thank you for your help.

Pantry Staff: Mark "Undisclosed" or leave blank in database all questions not on this intake or those a client skips.

b. Last name: _____ c. First name: _____

d. Date of Birth: ____/____/____ (mm/dd/yyyy) e. Is this birth date estimated? __Yes __No

f. **Gender:** Female₀₂ Male₀₁ Transgender₀₃ Other₀₅ Undisclosed₀₄

h. Address: _____

k. City: _____ m. Zip code: _____ No fixed address/ Undisclosed

q. **What Language(s) are spoken in your household?** (Select all that apply)

English₀₁ Spanish₀₂ Somali₀₃ Vietnamese₀₄ Russian₀₅ Mandarin₀₆
 Hindi/Urdu₀₇ Arabic₀₈ Other: _____₁₀

r. **What is your Ethnicity?** (Select all that apply)

White/Anglo₀₁ Asian₀₃ N/A (None)₀₈
 Black / African American₀₅ Alaska Native/ Aleut / Eskimo₀₇ Other₁₀
 Hispanic/Latino₀₂ Middle-Eastern / North-African₀₄ Undisclosed₀₉
 American Indian/Native American₀₆ Pacific Islander₁₁

Additional Household Members: (Please list each person you share this food with below and on the back side)

a. Last name: _____ b. First name: _____

c. Date of Birth: ____/____/____ (mm/dd/yyyy) d. Is this birth date estimated? Yes No

e. **Gender:** Female₀₂ Male₀₁ Transgender₀₃ Other₀₅ Undisclosed₀₄

f. **This person is your...** Spouse₀₁ Common-Law Partner₀₉ Child₀₂ Parent₀₃
 Sibling₀₄ Grandchild₀₅ Grandparent₀₆ Other Relative₀₇ Ward₁₄
 Boyfriend/Girlfriend₀₈ Friend₁₀ Roommate₁₃ Other₁₂ Undisclosed₁₁

g. **What is their Ethnicity?** White/Anglo₀₁ Asian₀₃ Black / African American₀₅
 Alaska Native/ Aleut / Eskimo₀₇ Hispanic/Latino₀₂ American Indian / Native American₀₆
 Middle-Eastern / North- African₀₄ Pacific Islander₁₀ N/A (None)₀₈ Other₁₁ Undisclosed₀₉

a. Last name: _____ b. First name: _____

c. Date of Birth: ____/____/____ (mm/dd/yyyy) d. Is this birth date estimated? Yes No

e. **Gender:** Female₀₂ Male₀₁ Transgender₀₃ Other₀₅ Undisclosed₀₄

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g. **What is their Ethnicity?** White/Anglo₀₁ Asian₀₃ Black / African American₀₅
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 Middle-Eastern / North- African₀₄ Pacific Islander₁₀ N/A (None)₀₈ Other₁₁ Undisclosed₀₉

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e. Gender: <input type="checkbox"/> Female ⁰² <input type="checkbox"/> Male ⁰¹ <input type="checkbox"/> Transgender ⁰³ <input type="checkbox"/> Other ⁰⁵ <input type="checkbox"/> Undisclosed ⁰⁴			
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<input type="checkbox"/> Spouse ⁰¹	<input type="checkbox"/> Common-Law Partner ⁰⁹	<input type="checkbox"/> Child ⁰²	<input type="checkbox"/> Parent ⁰³
<input type="checkbox"/> Sibling ⁰⁴	<input type="checkbox"/> Grandchild ⁰⁵	<input type="checkbox"/> Grandparent ⁰⁶	<input type="checkbox"/> Other Relative ⁰⁷
<input type="checkbox"/> Ward ¹⁴	<input type="checkbox"/> Boyfriend/Girlfriend ⁰⁸	<input type="checkbox"/> Friend ¹⁰	<input type="checkbox"/> Roommate ¹³
<input type="checkbox"/> Other ¹²	<input type="checkbox"/> Undisclosed ¹¹		
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<input type="checkbox"/> Middle-Eastern / North- African ⁰⁴	<input type="checkbox"/> Pacific Islander ¹⁰	<input type="checkbox"/> N/A (None) ⁰⁸	<input type="checkbox"/> Other ¹¹ <input type="checkbox"/> Undisclosed ⁰⁹

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