		Home Supply List		
Affiliates must ensure that all home sup than thirty (30) days after arrival. When not acceptable responses). The form m U.S. Tie housing.	completing this	form, please list the spe	ecific quantities provided (ch	eck marks or "enough" are
PA Name:				
Case Number				
Case Size				
Date of Arrival:				
Temporary (T) or Permanent (P) Housing:				
If Temporary, list any unavailable Supplies, Items, and/or Furniture: (Beds, bedding, bath towels, toiletries, and baby items are always required upon arrival)				
Address:				
		Furniture		
Item	Quantity	Donated, Provided by U.S. Tie or Purchased with R&P Funds	If Declined, List Culturally Appropriate Equivalent Provided	Quantity of Equivalent Provided
Mattress (and box spring, if needed) (only married couples or children under 5 of the same gender may be expected to share beds)				
Bed Frame				
Set of drawers, shelves or unit appropriate for storage of clothing (in each bedroom, unless each bedroom closet has adequate shelving to accommodate clothing)				
Couch or equivalent seating (at least one per family, in addition to kitchen chairs)				
Lamp(s) (at least one lamp per room, unless installed lighting is present and adequate, and lightbulbs as needed)				
Kitchen Table and Chair(s)				
(at least one table per case, and at least				
one chair per person)		Kitchen Items		
Items	Quantity	Donated, Provided by U.S. Tie or Purchased with R&P Funds	If Declined, List Culturally Appropriate Equivalent Provided	Quantity of Equivalent Provided
Tableware (at least one fork, knife and spoon per person)				
Dishes (at least one plate, bowl and cup per person)				
Pots and Pans (at least one sauce pan, one large pot one frying pan and one baking dish per family)				
Mixing/Serving Bowls				

V!4-h114! -	T	1	I	I
Kitchen Utensils (ex. spatula, wooden spoon, knife, serving				
utensils)				
Can Opener				
		Toiletries		
		by U.S. Tie or	If Declined, List	Quantity of Equivalent
Items	Quantity	Purchased	Culturally Appropriate Equivalent Provided	Provided
Toilet Paper (list number of rolls)				
Shampoo				
Soap				
Toothbrush (at least one per person)				
Toothpaste				
Personal hygiene items (such as deodorant, feminine hygiene products and razors)				
	Linens	and Other Household	Supplies	
Items	Quantity	Donated, Provided by U.S. Tie or Purchased with R&P Funds	If Declined, List Culturally Appropriate Equivalent Provided	Quantity of Equivalent Provided
Bath Towel				
(at least one per person)				
Sheets (at least one set per bed)				
Blanket(s) (at least one per bed as seasonally appropriate)				
Pillow(s) and Pillowcase (at least one set per person)				
Alarm Clock (cell phone alarm meets requirement)				
Paper, Pens and/or Pencils				
(one set per case recommended)				
	1	Cleaning Supplies		ı
Items	Quantity	Donated, Provided by U.S. Tie or Purchased	If Declined, List Culturally Appropriate Equivalent Provided	Quantity of Equivalent Provided
Dish Soap				
Bathroom/Kitchen Cleaner				
Laundry Detergent				
Sponges, Cleaning Rags and/or Paper Towels				
Waste Baskets (two per family)				
Trash Bags (list number of boxes)				
Mop or Broom				

Other Items and Food							
Items	Quantity	Donated, Provided by U.S. Tie or Purchased with R&P Funds	If Declined, List Culturally Appropriate Equivalent Provided	Quantity of Equivalent Provided			
Appropriate Seasonal Clothing							
(throughout the R&P period for work,							
school, and everyday use, including proper							
footwear, for each member of the family.							
Clothing need not be new, but must be clean, in good condition, and functional)							
Baby Items							
(as necessary throughout the R&P period							
including baby food, clothing, car seat,							
diapers, crib)							
Food available upon arrival							
(culturally appropriate, ready-to-eat food,							
plus food or food allowance equivalent to,							
at least, the prorated food stamp allocation							
for the case, incl. baby food as needed)							
Additional Items							
(appropriate to family size and							
By signing below, I hereby acknowledge that I have received all items as indicated above. I also hereby acknowledge that I have declined items, only if indicated above, and will accept the noted culturally appropriate equivalent item provided.							
Date Home Supply List Completed:							
PA Name:							
PA Signature:							
Adult 2 Client Name:							
Adult Client Signature:							
Adult 3 Client Name:							
Adult Client Signature:							
Adult 4 Client Name:							
Adult Client Signature:							
Staff Member Name							
Staff Member Signature:							