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| Email: sbsadministration@health.nsw.gov.au | | |
| Date Published: 22-Sep-17 | Applies to: All Food Services | Approver: QAF | |
| Author: Fifi Spechler | Modified: 7-Dec-17 | Version: 1.0 | |

**FM FOOD ITEMS BROUGHT IN FOR RESIDENTS**

**Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Time** | **Name of resident receiving food item(s)** | **Name of person providing food item(s)** | **Date food produced (if made at home)** | **If takeaway - where were item(s) purchased i.e. KFC** | **Brief description of food item(s)** | **Was the food provided** | |
| **Hot**  **✓** | **Cold**  **✓** |
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