

FOOD APPLICATION

Eligible program costs:

- Food vouchers, food boxes, grocery orders, restaurant vouchers, etc.

Ineligible costs:

- Tobacco, alcohol, paper products

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Please complete all information below if you are applying for monies to supplement current food programs:

Agency _____

Contact Person _____ Phone _____

Hours available for clients _____

Dollar amount requested \$ _____

Approximately how many meals bills do you anticipate paying with these funds?

Do you currently offer food assistance services? _____

Approximately how many residents do you assist each year with this service?

If your agency is not able to help people with food assistance, where else can they turn?

