## THE EMERGENCY FOOD ASSISTANCE PROGRAM - PROXY STATEMENT

Receipt of Pantry Commodities State Fiscal Year 2019 INCOME ELIGIBILITY BASED ON 185% OF THE FEDERAL POVERTY GUIDELINE

This proxy is for the individual who has disabling conditions which make pick-up of pantry commodities by the recipient impossible. It may also be used to serve those whose work hours conflict with those of scheduled distribution of USDA commodities.

## **Please Print**

Name of Recipient:		Date:			
Address:					
City:	State: Zip Code:				
Household Number of children in household Size: 18 years or younger?	SNAP Recipient? (SupplementalYes Nutrition Assistance Program)No				
Proxy:					
	Delivery Person				
Name of Pantry: Loaves & Fishes Community Pan	lry				
Address of Pantry: 1871 High Grove Lane					
City: Naperville	State: IL Zip Code: 60540				
Willful diversion of USDA commodities for personal gain is a state and federal offense subject to a fine of up to \$25,000 and/or imprisonment of up to 5 years.	DHS MAXIMUM MONTHLY GROSS INCOME FOR RECEIPT OF COMMODITIES INCOME GUIDELINES FOR SFY 2018 (JULY 1, 2018 THROUGH JUNE 30, 2019)				
I CERTIFY WITH MY SIGNATURE THAT:  My household monthly gross income does not exceed DHS established limits; the information I have provided above is accurate and true; I will use food received for household consumption only; and I release USDA, the State of Illinois and any agency or person distributing food from all liabilities resulting from receipt of food.	Household Size	Monthly Income	Household Size	Monthly Income	
	1	\$1,872	5	\$4,536	
	2	\$2,538	6	\$5,201	
	3	\$3,204	7	\$5,868	
	4	\$3,870	8	\$6,534	
	For households with more than 8 persons, add \$666 for each additional person				
Signature of Recipient	Distribution Dat	te			
Signature of Proxy		antry Personnel			