

**ALL FAITHS FOOD BANK
EMERGENCY FOOD ASSISTANCE PROGRAM (TEFAP)
CERTIFICATION OF ELIGIBILITY TO TAKE FOOD HOME**

7 CFR 251

Name: Robert Salamander

Number of People In Household: 4
*must be Sarasota or Desoto
 Other counties not eligible*
 County: Sarasota
↳ must be spelled out

Address: 123 Sesame St.
Sarasota*, FL 34236 } *Full Address*
 *City must be spelled out

The following shows a yearly gross income for each family size. If your household income is at or below the income listed for the number of people in your household, you are eligible to receive food. The chart below is effective July 1, 2020 - June 30, 2021.

Do not circle here. check below instead

Household Size	Annual Income	Monthly Income	Twice per Month	Every two Weeks	Weekly Income
1	\$16,588	\$1,383	\$692	\$638	\$319
2	\$22,412	\$1,868	\$934	\$862	\$431
3	\$28,236	\$2,353	\$1,177	\$1,086	\$543
4	\$34,060	\$2,839	\$1,420	\$1,310	\$655
5	\$39,884	\$3,324	\$1,662	\$1,534	\$767
6	\$45,708	\$3,809	\$1,905	\$1,758	\$879
7	\$51,532	\$4,295	\$2,148	\$1,982	\$991
8	\$57,356	\$4,780	\$2,390	\$2,206	\$1,103
For each additional family member add:	\$5,824	\$486	\$243	\$224	\$112

The chart details eligibility criteria for monthly income, income received twice monthly (24 payments per year), income received every two weeks (26 payments per year) and weekly income.

You are eligible to receive food from TEFAP if your household meets the income guidelines above or participates in any of the following programs. Please place a checkmark in the space next to the category that applies.

One of these must be checked off

- Income eligibility
- Supplemental Nutrition Assistance Program (SNAP) (fka Food Stamps)
- Temporary Assistance to Needy Families (TANF)
- Supplemental Security Income (SSI)
- Medicaid

If anyone in the household receives any of these benefits, the entire household qualifies

Please read the following statement carefully and then sign the form and write in today's date. You only need to meet one of these requirements to be eligible to receive USDA foods.

I certify that my yearly household gross income is at or below the income listed on this form for households with the same number of people OR that I participate in the program(s) that I have checked on this form. I also certify that as of today, I reside in the State of Florida. This certification is being submitted in connection with the receipt of Federal assistance. Program officials may verify what I have certified to be true. I understand that making a false certification may result in having to pay the State agency for the value of the food improperly issued to me and may subject me to civil or criminal prosecution under State and Federal law.

"Covid-19" → in place of client signature

12/8/2020

Signature

Date

[Handwritten initials]

→ Your initials

Designated Individual signing on behalf of client or designated proxy

Date

THIS CERTIFICATION IS VALID FOR A PERIOD OF ONE YEAR and may be renewed as needed. Any changes in the household's circumstances must be reported to the distributing agency immediately.

PROXY pick-up

OPTIONAL: I authorize Bart Simpson to pick up USDA foods on my behalf. *Must ask; but optional*

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.