tealthu I • W	A	Health and Human Ser	vices Age	es of e	eligib <u>le</u>	child	t-18:[ren:[/ Applicat	
The Eme	rgency	Food A	ssistan	ce Prog	ram (11	EFAP) E	ugibility	/ Арриса	lion
Name					-		-	ır household	
To be eligit guidelines	ole to rece	eive TEF <i>A</i>	AP USDA size, or r	Foods yo	ou must liv NAP and/o	ve in the s or Free ar	state of lo	wa, and me ed Lunch.	et income
								ross Incon	ne e
House- hold Size	1	2	3	4	5	6	7	8	Additional Person Add:
Yearly	\$28,953	\$39,128	\$49,303	\$59,478	\$69,653	\$79,828	\$90,003	\$100,178	+ \$10,178
Monthly	\$2,413	\$3,261	\$4,109	\$4,957	\$5,805	\$6,653	\$7,501	\$8,349	+ \$848
Weekly	\$557	\$753	\$949	\$1,144	\$1,340	\$1,536	\$1,731	\$1,927	+ \$196
My housel My housel					☐ No the table	above: []Yes [☐ No	
My househ									le a fauna.
The inform to receive future distr income go	nation I'm federal as ributions to oes over tified to be of the food	providing ssistance. hrough Ju the incomentum	on this for the second of the	orm is according that counderstand in the country i	curate as conce I signed I am reference for my here the make false	of today. In this form equired to cusehold estateme	I'm compl m, it's ass o report I. Progran nts, I may	tumed I'm e to the pant n officials m / have to pa	rm to be able ligible for
Recipient	Signature							Date	
Or									
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In accorda	ance with	federal ci	vil rights l ees, and i	aw and U	ISDA civil s participa	rights req ating in or	gulations a	and policies ering USDA	, the USDA, programs are

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2. fax: (833) 256-1665 or (202) 690-7442; or

3. email: program.intake@usda.gov

Additional Distribution:

Name	Number of people served	Date
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