Agency Name:	Date:
Agency Maine.	Date.



Site Address:

Self-declaration of Need & Liability Release

Eligibility for TEFAP is based on the need for emergency food and the household meets the income guidelines on this form or participates in SNAP, WIC, FDPIR, CSFP or SSI.

*The right table shows a gross income for each household size Based on 200 Percent Federal Poverty Income Guidelines

Household Size	Annual	Monthly	Weekly
1	\$27,180	\$2,430	\$561
2	\$39,440	\$3,287	\$758
3	\$49,720	\$4,143	\$956
4	\$60,000	\$5,000	\$1,154
5	\$70,280	\$5,857	\$1,352
6	\$80,560	\$6,713	\$1,549
For each additional family member add	\$10,280	\$857	\$192

Name:	Address:	City:	Zip:	Eligibility: ☐In Need of Emergency Food ☐ Income ☐ Program
# in house:	# Children:	# Seniors:	# Veterans:	

USDA Non-Discrimination Statement

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. To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: 1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Ave SW, Washington, D.C. 20250-9410.; 2) fax: (202) 690-7442; 3) email: program.intake@usda.gov This institution is an equal opportunity provider."

Rev. 10/2023		
		FEEDING
Agency Name:	Date:	AMERICA West Michigan

Site Address:

Day 40/2022

Self-declaration of Need & Liability Release

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Name:	Address:	City:	Zip:	Eligibility:
				☐In Need of Emergency Food
				☐ Income ☐ Program
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