



THE EMERGENCY FOOD ASSISTANCE PROGRAM - SIGNATURE SHEET
STATE FISCAL YEAR 2023 INCOME ELIGIBILITY BASED ON 185% OF THE FEDERAL POVERTY GUIDELINE

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DHS MAXIMUM MONTHLY GROSS INCOME FOR RECEIPT OF USDA COMMODITIES FOR FISCAL YEAR 2023
(JULY 1, 2022 THROUGH JUNE 30, 2023)

Household Size	1	2	3	4	5	6	7	8	9	10
Monthly Income	\$2,096	2,823	\$3,551	\$4,279	\$5,006	\$5,734	\$6,462	\$7,189	\$7,917	\$8,649

For households with more than 10 persons, add \$728 for each additional person up to 185% FPL

For receipt of commodities within this Federal grant program, I certify with my signature that:

My household monthly gross income does not exceed DHS established limits;

I will use food received for household consumption only; the information I have provided below is accurate and true; and

I release USDA, the State of Illinois, and any agency or person distributing food from all liability resulting from receipt of food.

Food Bank: _____ **Date:(MM/DD/YY)** _____

Household Size	Recipient Signature	Street Address (include apt. number)	City	Number of Children in household 18 years or younger TANF Food	Do you receive SNAP? Check One
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

Pantry: _____ **Address :** _____

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 up to 5 years.

This Institution is an Equal Opportunity Provider