Receipt of Pantry Commodities State Fiscal Year 2020 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:				
Addross:					
City:			ate: Zip	Code:	
Household Size: Number of children in household 18 years or younger?		SNAP Recipient? (Supplemental Yes Nutrition Assistance Program) No Please check only one box			
Proxy:					
Name of Pantry:	A00690 - Beyond Hunger	elivery Person			
Address of Pantry:					
USDA, its Agencies, of discriminating based or	deral civil rights law and U.S. Departme ffices and employees, and institutions pa n race, color, national origin, sex, disabil ducted or funded by USDA.	ent of Agriculture rticipating in or a	(USDA) civil ri	DA programs a	and policies, th
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 2020 (JULY 1, 2019 THROUGH JUNE 30, 2020)			
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	\$1,926	5	\$4,652
		2	\$2,607	6	\$5,333
		3	\$3,289	7	\$6,015
		4	\$3,970	8	\$6,696
	For households with more than 8 persons, add \$682 for each additional person				
Signature of Recipient		Distribution Da	te		
Signature of Proxy		Signature of Pantry Personnel			