

2014 Senior Farmers' Market Coupon Reimbursement Form

Senior Farmer Market Nutrition Program ends October 31, 2014.

ALL coupons MUST be delivered or received by mail for reimbursement by November 30, 2014.

Farmer Market Representative: Please complete a separate request form for each farmer. Attach all coupons from that farmer to his/her request form.

*Coupons must be turned within 30 days of receipt. Do not wait until the end of the season for coupon reimbursement. **Be sure to make a copy of your reimbursement form before giving it to the agency.***

Farmer Name: _____ Market Date: _____

Address: _____ City: _____ Zip: _____

Phone Number: _____

Number of coupons enclosed: _____ X \$5.00 = Amount Requested: \$ _____

Signature: _____ Date: _____
(Market Representative)

Coupons should be **received** by the agency by **the 10th and 25th of each month, July – November 2014**. Checks are **available** the 15th and 30th of each month. Please **call before you come** so someone is available to give you your check. If you would like your check mailed to you, please provide the agency with STAMPED SELF ADDRESSED envelopes.

Mail ORIGINAL coupons to: North Star Council on Aging
1424 Moore Street
Fairbanks, AK 99701
Phone: 907.452.1736
Fax: 907.451.9974

North Star Council on Aging Use:

Verified by: _____ Date: _____
Senior Farmers' Market Project Representative

State of Alaska, Family Nutrition Programs Use:

Verified by: _____ Date: _____
Senior Farmers' Market Project Coordinator