## CSFP Commodity Supplemental Food Program

## ADDITIONAL PROXY FORM

This form is being completed in connection with the receipt of the Commodity Supplemental Food Program (CSFP). I authorize the amendment of my original application to include an additional proxy. Furthermore, I understand and agree to the duties of a proxy to be as follows:

- A proxy can collect and sign for the participant's monthly food package from a distribution site. The proxy shall then deliver the package directly to the participant.
- Proxy must be acknowledged by the participant with the appropriate form which must contain both the participant and proxy's signatures. Forms will remain on file at the Utah Food Bank. Additional proxies can be added at any time.
- Proxies will be listed on the signature sheet; only the proxies listed on the signature sheet can collect a food package for a participant.

PLEASE PRINT NAME OF APPLICATION OR LEGAL GUARDIAN			
SIGNATURE OF APPLICANT OR LEGAL GUARDIAN		DATE	
PLEASE PRINT NAME OF PROXY	RELATIONSHIP		PHONE NUMBER
SIGNATURE OF PROXY		DATE	

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Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).

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