

Site proxy form

This form is being completed in connection with the receipt of the Commodity Supplemental Food Program (CSFP). I/we agree to serve as proxy on behalf of:

Site Name: _____

Site Address: _____

Furthermore, I/we 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 when the participant is unable to do so. The proxy has permission to deliver or store the package for the participant.
- 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.

Name of Proxy/Proxies	Title/Role	Date