Senior Farmers' Market Nutrition Program – Card Receipt Form

Form 1.2.5. (Rev. 04.2025) State of California California Department of Food and Agriculture Office of Grants Administration



SFMNP CARD RECEIF	PT FORM			
Senior Farmers' Market Nutrition Program (S The Area Agency on Aging (AAA) must always Farmers' Market Cards. A witness must be pres	control the re	ceip	t and se	curity of SFMNP
Receipt Log: The AAA PSA has received a total number of Cards.				_ Farmers' Market
Sequence Number of Cards:				
The <u>card number of the FIRST card</u> received:				
The <u>card number of the LAST card</u> received:				
Redemption Value:				
Total number of Cards received from CDFA this season:				
Total number of Cards retained from last season:				
Total number of Cards expected to be distribut	ed:			
Total value per Card:		X	\$	
Total Redemption Value:			\$	
Authorized Signatures:	,			
AAA Coordinator Signature:	AAA Witness Signature:			
Printed Name:	Printed Name:			
Date:	Date:			

CDFA SFMNP Coordinator Signature: