North Carolina Department of Agriculture and Consumer Services Food Distribution Division

THE EMERGENCY FOOD ASSISTANCE PROGRAM (TEFAP) PROXY AUTHORIZATION

Revised

Name of Food Bank/Food Pantry/Distribution Site:	
Participant's Name:	
Participant's Address:	
Number of people living in participant's household:	
Does participant receive FNS benefits? ☐Yes ☐ No	
Household monthly gross income: \$	
I authorize the following person(s) to pick up food for me from this TEFAP distribution site:	
Proxy full name:	
Proxy full name:	
Participant's Signature: [Date:

*PROXY AUTHORIZATION PERIOD IS VALID <u>OCTOBER 1st -SEPTEMBER 30th AND MUST BE</u>
RENEWED ANNUALLY WITH THE UPDATED INCOME ELIGIBILITY GUIDELINES*

TEFAP participants can update their information and/or change their designated proxies anytime during the year.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a <u>Form AD-3027</u>, USDA Program Discrimination Complaint Form which can be obtained online

at: https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:1. mail: U.S.. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; or 2. fax: (833) 256-1665 or (202) 690-7442; or 3. email: program.intake@usda.gov This institution is an equal opportunity provider.