

ISSUANCE AUTHORIZATION AND CLIENT RECEIPT

Part A

1. Name/Head of Household		2. Case Number	
3. Street	City		State Zip Code
4. Name/Authorized Representative			
5a. F.S. Allotment	5b. Month/Year Authorized	6a. F.S. Allotment	6b. Month/Year Authorized
7. Validity Period	Begin Date	End Date	8. Date Completed
9. Worker Signature		10. County Office	

Part B

I hereby acknowledge receipt of food coupon books on this date in the amount of \$ _____
 and in the amount of \$ _____

Signature (Head of Household, Spouse, or Authorized Representative)	Date
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Issuance Clerk's Initials _____ Date of Issuance _____

470-0335 (Rev. 9/00) White & Yellow: County Issuance Unit Pink Household Gold: Control file

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