

Proxy Letter – Phelps County Faith Distribution

_____, am authorizing the following
(print your name)

person _____ to pick up food for me at
(person picking up food)

Phelps County Faith Distribution in Rolla. My date of birth is: _____

There are _____ members in my household.

I have _____ children under 18 living in the home.

I do/do not receive food stamps

I do/ do not receive other state or federal aid (please list type, such as HUD,
energy assistance, Medicaid, etc.):

If neither of the above apply, please state your monthly gross income:

Address: _____

City/State: _____

Phone: _____

Signature: _____

Date: _____