

### FOOD ASSISTANCE PROGRAM CONTACT LIST

**MIFMA Food Access Team** 

Phone: 517-432-3381

Email: foodaccess@mifma.org

Food Bank Council of Michigan

**SNAP Outrach Resources** 

Phone: 888-544-8773

MerchantSource (Wireless Equipment)

Contact: Kim Lyons, President Phone: 1-800-313-5198 ext #2

Email: KimL@merchantsource.com

Program:

Contact:

**Program:** Contact:

Phone:

Email:

**WIC Project FRESH** 

Contact: Michelle Moore & Pam Gove

Email: MDHHS-WICProjectFRESH@michigan.gov

Phone:

Email:

**Double Up Food Bucks Customer Info** 

Phone: 866-586-2796

Email: info@doubleupfoodbucks.org

**Program:** Contact:

Phone:

Email:

Double Up Food Bucks/Fair Food Network

Contact: Ricardo Ortiz

Phone: 1-800-313-5198 ext #2

Email: rortiz@fairfoodnetwork.org

USDA – FNS (Farmers Market Workgroup)

Phone: 312-353-6609

Program:

Contact:

Phone:

Email:

Program: Contact:

Senior Project/Market FRESH

Contact: Marla Price Phone:

Email: MDHHS-SeniorprojectFRESH@michigan.

Email:

gov









# **DOUBLE UP FOOD BUCKS**

Market Name:
Season start date:
Season end date:
<ul> <li>Double Up Season Close Out Deadline:</li> <li>Deadline is one month after "season end date" or December 31 for year-round markets</li> </ul>
Starting Number of Double Up Tokens:
Starting Value of Incentive Funds:
Market Manager Portal Password:
Online Reporting Password:

# **2023 REPORTING SCHEDULE**

Q2: APR 1 - JUNE 30	Q3: JULY 1 - SEPT 30	Q4: OCT 1 - DEC 31	Q1: JAN 1 - MAR 31
Due by July 6th	Due by October 5th	Due by January 4th	Due by April 7th









## **SNAP FNS PERMIT INFORMATION**

Note: all fields should be filled out exactly as the information is listed on your SNAP permit. All changes in SNAP Information must be reported to USDA FNS 1-877-823-4369. Learn more at <u>Fns.usda.gov/snap/RSC</u>.

Location name:
7 digit FNS permit number:
Location of SNAP site:
Full name and title of signer of application/owner:
Date of submission:
Mailing address:
Email address:
Storage Location of FNS Permit Approval Letter:









# **SNAP EQUIPMENT INFORMATION**

Equipment Processing Company:
Customer Service Number:
Account Number:
Length of Contract/Grant Funding, if applicable:
Date of Contract Signing:
Contact/Signer on the Account (Full Name & Title):
Make & Model of Equipment:
Serial Number:
Email Address associated with account:
PCI Compliance (Expiration/Notes):
Expected/Anticipated Costs (Annual/monthly fees):
How do you receive monthly statements and where are they sent?:









## **SNAP BANK ACCOUNT INFORMATION**

Last 4 digits of bank account number:
Authorized Signers on Account (Full Names and Titles):
How are statements received? What email or physical address are they sent to?

Name of bank:





### **MARKET TOKENS**

MAKKEI IUKENS
Supplier:
Token Details (size, material, ink color, denominations):
How many have been printed (quantity and value)?
Storage location/link to the design:



