Food $en$e Payment Summary Form

Month/Year_____________  Site_____________

No. of Units ordered _____ x $20.00 each = _______
No. of Special #1 ordered _____ x _____ each = _______
No. of Special #2 ordered _____ x _____ each = _______
No. of Special #3 ordered _____ x _____ each = _______
No. of Special #4 ordered _____ x _____ each = _______
No. of Special #5 ordered _____ x _____ each = _______
No. of Special #6 ordered _____ x _____ each = _______
No. of Special #7 ordered _____ x _____ each = _______
No. of Special #8 ordered _____ x _____ each = _______

Adjustments from previous months ______________ = _______
(if you owe money or have a credit)

Total Enclosed = _______

Amount of each form of payment:
Check = _______
Food Stamp Voucher = _______
Money Order = _______
Total Enclosed = _______

Food Stamp Vouchers: Please write your site name on the top left corner of each voucher. If you mail food stamp vouchers, we encourage you to send them by Registered Mail for your protection. You may also want to insure the package for the value of the food stamp vouchers. You should NOT use Certified Mail or a “return card”.

Name and address of person sending payment:
Name: ____________________________________________
Address: ____________________________________________
Phone Number: ______________________________________

Please mail payment and this form to: Food Bank of Central New York
7066 Interstate Island Rd
Syracuse, NY 13209

Please allow enough time for payment to reach the Food Bank by the due date. This allows us to pay for the food in advance and keep the prices low. Food will not be delivered if full payment has not been received. Questions? Call the Food Bank at 437-1899 or (800) 444-1562 ext. 230. Thank you.