

**(Name of Market)**

**Token Reimbursement Form**

**Vendor Name:** Sample Vendor



**Debit:** Every vendor may accept (*token color*) \$5 debit tokens.



**(State food stamp card):** (*Token color*) \$1 tokens were purchased with an (*State food stamp card*) and may only be used to purchase food that is NOT hot and ready to eat. This includes fruit, vegetables, meat, poultry, seafood, bakery items, cheese AND seeds and plants intended for growing food.

**Reimbursement:** Please return your tokens to me in this envelope *weekly*. All tokens must be turned in at the end of the month. Market Manager will hand deliver your check in this envelope two weeks after tokens are submitted.

Date	Debit (\$5 Tokens)			State FS card (\$1 Tokens)			Market Comments
	# Tokens	Total \$	Market Count	# Tokens	Total \$	Market Count	
5/6/06							
5/13/06							
5/20/06							
5/27/06							
6/3/06							
6/10/06							
6/17/06							
6/24/06							
7/1/06							
7/8/06							
7/15/06							
7/22/06							
7/29/06							
8/5/06							
8/12/06							
8/19/06							
8/26/06							
9/2/06							
9/9/06							
9/16/06							
9/23/06							
9/30/06							
10/7/06							
10/14/06							