

**OFFICE USE**

Intake/Distribution Day: 2/10 2/22

How was the following verified?

Residency: CA ID Passport Other: _____

Age: CA ID Passport Other: _____

Veteran's Status: _____

Receipt(s) Total \$ Amount: _____**Westminster First Grocery Assistance Program 2022-2023***The Westminster First Grocery Assistance Program is funded by the American Rescue Plan Act.*

To receive a \$100 Visa Gift Card, please submit the following:

- ✓ **This completed application**
- ✓ **Proof of Westminster residency and either proof of age (55+) or Military Veteran status.**
- ✓ **Receipts showing purchases made after November 21, 2022 at a store in Westminster that sells groceries, totaling a minimum of \$100 before tax.**

Submissions will be accepted at the Community Services Building (8200 Westminster Blvd.) on **Friday, February 10, 2023 from 10 a.m. - 2 p.m. and Wednesday, February 22, 2023 from 2 p.m. – 6 p.m.; while supplies last.** Documents will be verified prior to receipt of \$100 Visa Gift Card. One gift card per person; those who have previously received cannot reapply. Applicant must be present to receive Visa Gift Card.

Client Information

First Name: _____ Last Name: _____

Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email: _____

Receipt of Acknowledgement: By signing below, you acknowledge the following statement: "I experienced financial and/or food insecurity due to the pandemic. I certify that the above information is true and correct and that I received my \$100 Visa Gift Card. I understand that the City of Westminster is not responsible for lost or stolen gift cards."

Recipient Signature: _____ **Date:** _____**OFFICE USE – Visa Gift Card Information**

Gift Card #: _____

Staff Signature: _____ Date: _____