DECLARATION OF SERVICE & SERVICE AREA

To better serve those in need and strengthen our network, Food Bank of Central New York partner food pantries are encouraged to establish service areas to help sustain program resources. Partner agencies that distribute food for home consumption (pantries) are able to establish a service area - a block group, neighborhood, village, town, city, or county for which they provide services to.

Please complete the following information. If you have a printed map or street list that you currently use, please attach a copy and return to Food Bank of Central New York.

Partner Agency Name:			
Partner Number:			
Site Address:			
City:	County:	Zip:	
Food Program Coordinator			
Date:			
Service Type: [☐ 9 Meals (3 Days)	☐ 15 Meals (5 Day)	☐ 21 Meals (7 Day)
Please indicate which type of service area you use (complete 1)			
☐ School District:			
-OR-			
☐ City, Town, Village, County:			
-OR-			
☐ Zip Code(s)			
-OR-			
☐ Service area by street or neighborhood (if street or neighborhood- attach additional sheets):			
Completed by*: (PRINT)			
Signature:			

*Only the sponsoring 501 (c) (3) executive director or coordinator of record are authorized to make account changes.