

Community Sharing Pantry, One Kennedy Street, Mauston

2020 Pantry Guidelines for clients during Covid19

This pantry is to be used only by families who live in the Mauston/Lyndon School District.

We will NOT BE serving families from other areas!

At this time – all area pantries are open as usual, but with new guidelines!

If you are ill from anything – you may not come in. You may allow another person to get your food – but they must have a note from you, or call 847-5454 to give verbal permission.

If you wish to provide extra protection for yourself – you must bring your own mask and gloves! We are practicing “Social Distancing” and safety cleaning.

We have plenty of food – don’t panic! – Do not come early!

- 1) We are open each Tuesday, Wednesday, Thursday from **9:30 to 11 AM** (except holidays)
 - A) **Please do not arrive before 9:00; however, please arrive no later than 10:45.**
 - B) STAY in your vehicle! A Number will be brought to you and you will be called in one at a time.
 - C) **DO NOT bring your own bags or boxes** for groceries. They need to come from us.
 - D) Only 1 person per family will be allowed in.
- 2) ****Each month you need to remember to bring a photo ID and a current piece of mail for address verification.** *If you do not have a Photo ID, you may bring 2 different pieces of mail.* The mail needs to be a current utility bill such as: GAS, ELECTRIC, WATER, SEWER, PHONE, CABLE, OR GARBAGE – which shows any one of the people in the residence as responsible for this bill. IF YOU DO NOT HAVE ANY OF THESE BILLS, TALK TO THE MANAGER FOR OTHER OPTIONS.
****Once a year - within the first 3 visits - you must show verification for ALL members in your household.** *If we have any reason to question your residency or family size, we may require additional documentation.*
- 3) **All our food is donated. Please do not feel you need to take items you cannot use.**
Our pantry is attempting to provide 8 complete meals for 8 days, depending on donations. Normally this is 4 days, we have doubled this amount to accommodate this health care crisis. **You may come just 1 time during the month.**
- 4) **Everyone living at the same address is served as one household. Your household income is income from ALL people living in your house.** Current income guidelines are posted at the pantry and on the back of this sheet.
- 5) **VERY IMPORTANT:** You may have someone who is not listed on your card pick up your groceries for you. They will need to bring a signed permission slip from you **OR Call Kathy Green to set up verbal permission** (a sample of this note is on the back of this sheet). Call Kathy Green at 847-5454 for further information.
- 6) **Please do not take the grocery cart into the parking lot.** You may use this cart to get your groceries out onto the cement, then pull your car up to load it. Park the cart in the designated area. **Do not pack your boxes very heavy.** You are responsible for loading and unloading your own groceries.
- 7) **We are all unpaid volunteers, here to help you.** Please treat us with the same courtesy and respect with which we treat you. Disorderly conduct and foul language will not be tolerated. Offensive clothing will not be allowed. Shoes must be worn! You will need to immediately correct the issue, or you will need to leave. Let’s all work together – and remember our volunteers are here for you!

8) **This institution is an equal opportunity provider. We serve people regardless of religious, ethnic or political affiliation.**

9) **We will be adjusting this list as needed. We are an essential service. We will be OPEN!**

We are glad to be of service to you. If you have any questions or suggestions, we have two contact numbers. When the pantry is open - our cell phone is 547-4171. At other times, contact Kathy Green at 847-5454. It may take a day; however, someone will get back to you as soon as possible.

Maximim Income For Receipt of TEFAP Commodities
Current Household Income Limits as of March 1, 2020

Combined Income for Everyone In Household

(Our Pantry follows Wisconsin Dept. of Health & Family Service guidelines to determine eligibility.)

Household Size	Monthly Income
1	\$1,967
2	\$2,658
3	\$3,349
4	\$4,039
5	\$4,730
6	\$5,421
7	\$6,111
8	\$6,802
9	\$7,493

Households of 10 or more add \$691 per person
Amounts based on 185% of federal poverty levels

Sample Permission Slip – use only if healthy

Call for permission if ill – we don't want your volunteer to have to catch anything – even regular flu!!

I, (Print your name), give permission for (print name of person picking up your groceries) to pick up my groceries at the pantry.

My combined household income for the month is still under limits as listed above.

The names and birthdays of people living in my household is _____. (list all OR if it has not changed since the previous time you got groceries--you may put "unchanged").

Then Sign and Date the permission slip.

****The person who brings in a permission slip from you. We will keep the permission slip or note verbal consent. They also will need to show a picture ID of themselves to pick up your food.**