

Appendix F

OCT	NOV	DEC	JAN	FEB	MAR
TEFAP COMMODITY IDENTIFICATION CARD					
NAME: _____					
ADDRESS: _____					
HOUSEHOLD SIZE: _____ DATE ISSUED: _____					
ISSUING AGENCY: _____					
APPLICANT SIGN: _____					
REV. 7/13					
APR	MAY	JUN	JUL	AUG	SEP

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