

**The Emergency Food Assistance Program (TEFAP)**

**Wisconsin Household Income Eligibility during the**

**COVID-19 Pandemic, beginning June 1, 2020**

**Elegibilidad de ingresos de los hogares de Wisconsin durante
la pandemia COVID-19, a partir del 1 de junio de 2020**

TEFAP Applicants self-declare income eligibility by determining that their combined household income is equal to or less that the amounts shown in the table below. Proof of income is not required or allowed to enroll in TEFAP.

Los solicitantes del TEFAP declaran por sí mismo elegibilidad de ingresos al determinar que sus ingresos combinados del hogar son iguales o inferiores a las cantidades que figuran en la tabla siguiente. No se requiere ni se permite la prueba de ingresos para inscribirse en TEFAP.

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| Household SizeTamaño del hogar | Combined Household Annual IncomeIngresos anuales combinados del hogar  | Combined Household Monthly IncomeIngresos mensuales combinados del hogar | Combined Household Weekly Income Ingresos semanales combinados del hogar  |
|  |  |  |  |
| 1 person / 1 persona | $38,280 | $3190 | $736 |
|  |  |  |  |
| 2 people / 2 personas  | $51,720 | $4310 | $995 |
|  |  |  |  |
| 3 people / 3 personas | $65,160 | $5,430 | $1,253 |
|  |  |  |  |
| 4 people / 4 personas  | $78,600 | $6,550 | $1,512 |
|  |  |  |  |
| 5 people / 5 personas  | $92,040 | $7,670 | $1,770 |
|  |  |  |  |
| 6 people / 6 personas  | $105,480 | $8,790 | $2,028 |
|  |  |  |  |
| 7 people / 7 personas  | $118,920 | $9,910 | $2,287 |
|  |  |  |  |
| 8 people / 8 personas  | $132,360 | $11,030 | $2,545 |
|  |  |  |  |
| 9 people / 9 personas  | $145,800 | $12,150 | $2,804 |
|  |  |  |  |
| 10 people / 10 personas  | $159,240 | $13,270 | $3,062 |
|  |  |  |  |
| 11 people / 11 personas  | $172,680 | $14,390 | $3,321 |
|  |  |  |  |
| 12 people / 12 personas  | $186,120 | $15,510 | $3,579 |
|  |  |  |  |

To determine eligibility for households of more than 12 members, add $12,760 per additional person per year; this value equals an additional $1063 per additional person per month.

Para determinar la elegibilidad de los hogares de más de 12 miembros, añada $12,760 dólares por persona adicional por año; este valor equivale a $1,063 dólares adicionales por persona adicional por mes.

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| **DEPARTMENT OF HEALTH SERVICES**Division of Public HealthF-40059A (06/2020) | **STATE OF WISCONSIN** |
| **TEFAP Outlet Name / Nombre de la despensa de TEFAP** | Distribution / Distribución |
|        |        |
| Use this record instead of TEFAP application forms during “no contact” food distributions to households. This meets all TEFAP requirements for participant data collection and reporting. Show the household TEFAP income limits (page 1).If an individual meets income guidelines, verbally collect and record data below. Retain in a secure location. Report the number of persons and households served monthly. Age groups will not be collected at this time. |
| Utilice este registro en lugar de los formularios de solicitud del TEFAP durante las distribuciones de alimentos a los hogares "sin contacto.” Esto cumple todos los requisitos del TEFAP para la recopilación de datos y la presentación de informes de los participantes. Muestre los límites de ingresos del hogar del TEFAP (página 1).Si una persona cumple con las pautas de ingresos, recopile y registre verbalmente los datos que se indican a continuación. Reténgalos en un lugar seguro. Informe sobre el número de personas y los hogares atendidos mensualmente. Las edades de los grupos no se recopilarán en este momento. |
| First & Last Name / Nombre y apellido | Number of persons / Número de personas | Address / Dirección | R = Return / De vueltaN = New / Nuevo |
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This sheet is       of       sheets that complete the entire record for today’s household distributions.

Esta hoja es       de       hojas que completan el registro completo de las distribuciones domésticas de hoy.