The Senior Farmers’ Market Nutrition Program (SFMNP) provides low-income seniors with eligible fresh produce with the goal of improving their health and nutritional status. Each SFMNP participant will receive a booklet of coupons worth $50.00 (ten $5.00 coupons) to exchange for fresh, nutritious, and unprocessed locally grown fruits, vegetables, herbs, and honey from an authorized farmer or farmers’ market (outlet).

**How the Senior Farmers’ Market Nutrition Program Works**

1. **Apply.** Complete the enclosed SFMNP Application Form for each person in the household who qualifies for SFMNP benefits. **Applicants must be certified to participate each year. This is a VERY POPULAR program with very limited capacity. First come, first served! Apply as soon as possible after you receive this flyer.** You may only receive **ONE** booklet of coupons. The eligibility requirements are:

<table>
<thead>
<tr>
<th>Categorical</th>
<th>You must be at least 60 years old</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum Annual</td>
<td></td>
</tr>
<tr>
<td>Household Income</td>
<td></td>
</tr>
<tr>
<td>One Person</td>
<td>$27,417</td>
</tr>
<tr>
<td>Two Persons</td>
<td>$37,074</td>
</tr>
<tr>
<td>Additional Member</td>
<td>Add $9,657 per additional household member (including children)</td>
</tr>
</tbody>
</table>

2. **Qualify.** Qualified participants will be sent a coupon booklet and a coupon handout, which includes a schedule of outlets where the coupons can be used.

3. **Shop.**
   a. SFMNP coupons must be used by October 31, 2022;
   b. Only SFMNP participants or authorized representatives (proxy) may use the SFMNP coupons. A proxy must be designated on the enclosed SFMNP Application Form. Use by anyone else is **ILLEGAL**;
   c. Bring the coupon booklet to the farmers’ market listed on the schedule of SFMNP farmers’ market;
   d. Authorized outlets will have a sign showing that they will accept SFMNP coupons;
   e. No cash change may be given by the farmer. Please try to use the full $5.00 amount of each coupon.

**FOR MORE INFORMATION OR ASSISTANCE, PLEASE CONTACT YOUR LOCAL AGENCY:**

<table>
<thead>
<tr>
<th>Oahu</th>
<th>Hawaii County Economic Opportunity Council</th>
<th>Maui Economic Opportunity</th>
<th>Hawaii Foodbank - Kauai</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hawaii Foodbank, Inc.</td>
<td>47 Rainbow Drive</td>
<td>99 Mahalani Street</td>
<td>4241-A Hanahao Place</td>
</tr>
<tr>
<td>2611 Kilihau Street</td>
<td>Hilo, Hawaii 96720</td>
<td>Wailuku, Hawaii 96793</td>
<td>Lihue, Hawaii 96766</td>
</tr>
<tr>
<td>Honolulu, Hawaii 96819</td>
<td>(808) 961-2681</td>
<td>(808) 249-2990</td>
<td>(808) 482-2087</td>
</tr>
<tr>
<td>(808) 836-3600</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**State of Hawaii – for information only –**

**PLEASE DO NOT MAIL APPLICATIONS TO OCS:**

Office of Community Services
830 Punchbowl Street, Room 420 Honolulu, Hawaii 96813 Call: (808) 586-8675 Email: dlir.ocs@hawaii.gov Web: labor.hawaii.gov/ocs

Form OCS-SFMNP-2 (updated Nov 2021)
YOUR SFMNP RIGHTS AND RESPONSIBILITIES

Your Rights
As an applicant/participant of SFMNP you have the following rights to:

• Be treated with dignity, respect, and without discrimination.
• Be notified in writing, within 15 days of applying, if you are not determined eligible.
• Appeal an eligibility decision if you feel that determination was made in error.
• Have information you provided kept private unless you request for it to be shared.
• Make a complaint if you feel you have not been treated fairly.
• Have clear directions of how and where to use the coupons you receive.
• Learn about other services that may be available to you. You may contact your local agency for services in your area.
• File a complaint with your local agency about improper farmer or farmers’ market program practices.

Your Responsibilities
As an applicant/participant in SFMNP you have the following responsibilities:

• Funding for this program is very limited and is available on a first-come, first-served basis. APPLY FOR YOUR COUPONS AS SOON AS YOU CAN. Do not wait!
• Provide correct information, to the best of your knowledge, to determine eligibility.
• Giving false information and/or intentionally concealing facts could result in your paying back benefits or legal action.
• It is ILLEGAL to collect benefits more than once or at multiple distribution sites during a season. TEN COUPONS is the limit per person.
• Consume the fresh produce obtained through this program yourself.
• Safeguard the coupons you receive. Please report to your local agency if they are lost or stolen. Lost or stolen coupons will not be replaced.
• Redeem your coupons with authorized outlets by October 31, 2022.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed complaint form or letter to USDA: Mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) Fax: (202) 690-7442; or (3) Email: program.intake@usda.gov.

DO NOT SEND YOUR APPLICATION TO USDA OR TO OFFICE OF COMMUNITY SERVICES.
SEND YOUR APPLICATION TO YOUR LOCAL AGENCY IN HAWAII.

This institution is an equal opportunity provider.