

## University of Kentucky SNAP-Ed Food Demonstration Receipt Form



**Please select one:**

\_\_\_ NEP Assistant Allotment

\_\_\_ County Allotment

Date: \_\_\_\_\_

Name: \_\_\_\_\_

County: \_\_\_\_\_

**Receipt due date  
TWO OPTIONS:**

1) Postmark immediately after purchase, **OR**

2) Postmark receipts dated 1<sup>st</sup> – 15<sup>th</sup> by the 15<sup>th</sup>, **AND** postmark receipts dated 16<sup>th</sup> – 31<sup>st</sup> by the 5<sup>th</sup> of the following month

**Remit to:**

UK Nutrition Education Program  
1500 Bull Lea Rd. Suite 130  
Lexington, KY 40511  
Phone: 859-257-2948

**Reimbursement Rate Up To:  
\$2.25 per participant**

Receipt Date	Vendor (Store)	Reimbursement Amount	Program Title	Name of Recipe	Number of Participants
10/21/20	Kroger	\$8.42	Eating More Fruits	Strawberry Smoothie	18

Print form and attach the original receipt(s) for food, supplies, and small equipment used for demonstration purposes as part of the UK SNAP-Ed Program. Please order receipt information chronologically, and **DO NOT** use highlighters on the receipts. Sales tax that is incurred will be deducted from reimbursement total upon processing.