

# University of Kentucky SNAP-Ed Food Demonstration Receipt Form



Date: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 County: \_\_\_\_\_

**Please select one:**

\_\_\_ Assistant Allotment  
 \_\_\_ County Allotment

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

**Remit To:**  
 UK Nutrition Education Program  
 1500 Bull Lea Rd Suite 130  
 Lexington, KY 40511

Receipt #	Vendor (Store)	Reimbursement Amount	Program Title	Name of Recipe	Number of Participants
	Example: Kroger	\$8.42	Eating More Fruits	Strawberry Smoothie	18
Receipt #1					
Receipt #2					
Receipt #3					
Receipt #4					
Receipt #5					
Receipt #6					
Receipt #7					
Receipt #8					

Print form and attach the original receipt(s) for food and paper supplies used for demonstration purposes as part of the UK SNAP-Ed Program.

Write receipt# (from 1st column on the left side of this page) on the top of the original grocery receipt.

Please **DO NOT** use highlighters on the receipts.