

Wholesaler Food Stamp Redemption Certificate Form FNS-278-4

(A) VALUE OF COUPONS		FNS-278-4	U.S. DEPARTMENT OF AGRICULTURE	FOOD AND NUTRITION SERVICE	ISSUANCE STATE
TOTAL		1	WHOLESALE FOOD STAMP REDEMPTION CERTIFICATE		
100	00	2	\$	4	3
00	00	3	\$	5	\$
00	00	TOTAL			\$
(B) WHOLESALE		(C) NAME			
ABC WHOLESALE FOODS		NAME			
985 ASHLAND AVENUE		ADDRESS			
PLATEAU, ILLINOIS 60640		OFFICIAL'S EMP CODE			
FNS AUTH. NO. 0000000		TITLE			
SIGNATURE OF FNS REPRESENTATIVE		DATE			
SIGNATURE		DATE			
<small>THIS IS TO CERTIFY THAT THE FOOD COUPONS SUBMITTED HERETO FOR REDEMPTION WERE RECEIVED IN COMPLIANCE WITH THE FOOD STAMP PROGRAM REGULATIONS.</small>					
<small>DO NOT FOLD, STAPLE OR MUTILATE</small>					

INSTRUCTIONS FOR COMPLETING THIS FORM

1. In ITEM A, show the total value of the coupons taken to the bank with this redemption certificate.
2. In the RED AREA, place a single vertical line within the boxes which match the numbers at the top of each column in ITEM A. If you make a mistake, start again on a new form. **USE A #2 PENCIL TO COMPLETE THIS FORM.**
3. In ITEM C, show the complete name and address of your bank.
4. In the spaces marked 1 through 7, show the authorization number of each retailer for which you have a redemption certificate and the total value of the coupons given to you by each retailer. On the line marked TOTAL, show the value of the retailer coupons shown on lines 1-7. This TOTAL should match the amount shown in ITEM A.
5. Put your signature and the date on this certificate.

OMB STATEMENT

Public reporting burden for this collection of information is estimated to average .020 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any burden, to Department of Agriculture, Clearance Officer, OIRM, P.O. Box 7630, Washington, D.C. 20250.