

SNAP & Double SNAP Weekly Reports



Date: _____

Location: _____

of Pages: _____

MARKET ADMIN

Paid Staff (Name, Hours OPTIONAL): _____

of Volunteers: _____

\$ Spent on Incentive Program: \$ _____

(This can be a best-guess estimate (Include staff and admin time, outreach, supplies, etc.)

MARKET DAY TOTALS

SNAP Sales \$	DSD Sales \$	# Produce Vendors:	EDUCATIONAL ACTIVITIES
SNAP reimbursements \$	DSD reimbursements \$	# SNAP Vendors:	Check off activities below

Last 4 digits of card	Total SNAP	DSD Match Given	Nutrition Class Coupon?	Total Given	Notes
1)					
2)					
3)					
4)					
5)					
6)					
7)					
8)					
9)					
10)					
11)					
12)					
13)					
14)					
15)					
Total			Total		

DSD ADMIN USE ONLY

Check the following totals in Smartsheet match this report:

TRANSACTIONS	VENDOR REIMBURSEMENT	POST MARKET	
# Transactions <input type="checkbox"/>	Pay. Redeem/SNAP reimb <input type="checkbox"/>	Vendors <input type="checkbox"/>	<input type="checkbox"/> SNAP-ED/EFNEP
Payment Dist./SNAP Sales <input type="checkbox"/>	Inc. Redeem/DSD reimb <input type="checkbox"/>	Staff/Volunteers <input type="checkbox"/>	<input type="checkbox"/> Harvest of the Month
Incentives Dist./DSD Sales <input type="checkbox"/>		Education Activities <input type="checkbox"/>	<input type="checkbox"/> Nutrition/Health
			<input type="checkbox"/> Cooking Demo
			<input type="checkbox"/> Kids Activities
			<input type="checkbox"/> Other: