

# COUPON REDEMPTION FORM

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

Make Check Payable to: \_\_\_\_\_ *or*  Check for Direct Deposit

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

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

**FMNP Stamp #:** \_\_\_\_\_

Reference # (Optional): \_\_\_\_\_

<b>COUPON TYPE</b>	<b>NUMBER OF COUPONS</b>	<b>(\$)</b> VALUE
Farmers' Market Nutrition Programs	_____	_____
NYC Farmers Market Health Bucks	_____	_____
FreshConnect Checks	_____	_____
Healthy Seniors	_____	_____
CNY Health Bucks	_____	_____
<b>TOTAL</b>	_____	_____

# COUPON REDEMPTION FORM

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

Make Check Payable to: \_\_\_\_\_ *or*  Check for Direct Deposit

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

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

**FMNP Stamp #:** \_\_\_\_\_

Reference # (Optional): \_\_\_\_\_

<b>COUPON TYPE</b>	<b>NUMBER OF COUPONS</b>	<b>(\$)</b> VALUE
Farmers' Market Nutrition Programs	_____	_____
NYC Farmers Market Health Bucks	_____	_____
FreshConnect Checks	_____	_____
Healthy Seniors	_____	_____
CNY Health Bucks	_____	_____
<b>TOTAL</b>	_____	_____

# FARMERS MARKET COUPON REDEMPTION FORM

Stamp the face of each coupon with your current Farmers Market Nutrition Program (FMNP) stamp, if you have one, or initial the coupon.

The guarantee reimbursement, final redemptions must be postmarked no later than:

Farmers' Market Nutrition Programs	<b>December 15</b>
NYC Health Bucks	<b>February 28, 2025</b>
FreshConnect Checks	<b>January 15, 2025</b>
CNY Health Bucks	<b>December 15</b>



To sign up for Direct Deposit, please fill out this form and we will contact you to provide further information.

Complete this redemption form and mail with your stamped coupons to:

**Farmers Market Federation of New York**  
109 Twin Oaks Drive  
Syracuse, NY 13206

---

# FARMERS MARKET COUPON REDEMPTION FORM

Stamp the face of each coupon with your current Farmers Market Nutrition Program (FMNP) stamp, if you have one, or initial the coupon.

The guarantee reimbursement, final redemptions must be postmarked no later than:

Farmers' Market Nutrition Programs	<b>December 15</b>
NYC Health Bucks	<b>February 28, 2025</b>
FreshConnect Checks	<b>January 15, 2025</b>
CNY Health Bucks	<b>December 15</b>



To sign up for Direct Deposit, please fill out this form and we will contact you to provide further information.

Complete this redemption form and mail with your stamped coupons to:

**Farmers Market Federation of New York**  
109 Twin Oaks Drive  
Syracuse, NY 13206