Customer Record Sheet – Daily

Use a new customer record sheet for each market day.
Attach a copy of your daily EBT batch report to this sheet. Confirm with Cash customers that they are using SNAP cash benefits.
Record totals (in shaded row at the bottom) in online monthly reporting and save all customer record sheets in your DUFB reporting binder.
Fill in GREEN columns for SNAP sales. Fill in BLUE columns for SNAP Cash sales.
Use permanent ink or ball-point pen (no inks that will run if sheet gets wet).

Market date: _____ Market Name:_____

Optional notes:

FARMERS MARKET FUND

Ask customer using these exact words:



Time (not required by FMF)	$$$ SNAP ($ from EBT Card)	# DUFB (# of Food Bucks given)	$$$ DUFB ($ value of Bucks)	$$$ SNAP Cash ($ from EBT Card)	# Produce Match (# of cards given)	$$$ Produce Match ($ value of match)	Customer's First time? Y/N
1.	$	#	$	$	#	$	
2.	$	#	$	$	#	$	
3.	$	#	$	$	#	$	
4.	$	#	$	$	#	$	
5.	$	#	$	$	#	$	
6.	$	#	$	$	#	$	
7.	$	#	$	$	#	$	
8.	$	#	$	$	#	$	
9.	$	#	$	$	#	$	
10.	$	#	$	$	#	$	
11.	$	#	$	$	#	$	
12.	$	#	$	$	#	$	
13.	$	#	$	$	#	$	
14.	$	#	$	$	#	$	
15.	$	#	$	$	#	$	
16.	$	#	$	$	#	$	
17.	$	#	$	$	#	$	
18.	$	#	$	$	#	$	
sheet TOTAL	$	#	$	$	#	$	# of YES:
day TOTAL (last page only)	$	#	$		#		# of YES:

Total # DUFB Transactions:
Food Bucks COUNT at START: # / $
Food Bucks COUNT at END: # / $

Total # SNAP Cash Produce Match Transactions:
Produce Match COUNT at START: # / $
Produce Match COUNT at END: # / $

Time (not required by FMF)	$$$ SNAP ($ from EBT Card)	# DUFB (# of Food Bucks given)	$$$ DUFB ($ value of Bucks)	$$$ SNAP Cash ($ from EBT Card)	# Produce Match (# of cards given)	$$$ Produce Match ($ value of match)	Customer's First time? Y/N
19.	$	#	$	$	#	$	
20.	$	#	$	$	#	$	
21.	$	#	$	$	#	$	
22.	$	#	$	$	#	$	
23.	$	#	$	$	#	$	
24.	$	#	$	$	#	$	
25.	$	#	$	$	#	$	
26.	$	#	$	$	#	$	
27.	$	#	$	$	#	$	
28.	$	#	$	$	#	$	
29.	$	#	$	$	#	$	
30.	$	#	$	$	#	$	
31.	$	#	$	$	#	$	
32.	$	#	$	$	#	$	
33.	$	#	$	$	#	$	
34.	$	#	$	$	#	$	
35.	$	#	$	$	#	$	
36.	$	#	$	$	#	$	
37.	$	#	$	$	#	$	
38.	$	#	$	$	#	$	
39.	$	#	$	$	#	$	
40.	$	#	$	$	#	$	
41.	$	#	$	$	#	$	
42.	$	#	$	$	#	$	
45.	$	#	$	$	#	$	
46.	$	#	$	$	#	$	
sheet TOTAL	$	#	$	$	#	$	# of YES:
day TOTAL (last page only)	$	#	$	$	#	$	# of YES:

Total # DUFB Transactions:
Food Bucks COUNT at START: # / $
Food Bucks COUNT at END: # / $

Total # SNAP Cash Produce Match Transactions:
Produce Match COUNT at START: # / $
Produce Match COUNT at END: # / $