



**SNAP E&T Self-Attestation Form  
For Transportation Reimbursement**

**Orientation/Assessment**

I am unable to produce receipts to verify that I paid for my transportation expenses to attend a **SNAP E&T Orientation and/or Assessment** on \_\_\_\_/\_\_\_\_/\_\_\_\_. By my signature below, I attest that I paid for this expense.

I understand I will only be reimbursed \$12.50 due to limited SNAP funds.

**Activity**

I am unable to produce receipts to verify that I paid for my transportation expenses to attend a **SNAP E&T Activity** for the month of \_\_\_\_\_. By my signature below, I attest that I paid for this expense.

I understand I will only be reimbursed the actual amount that I spent (maximum allowed: \$25.00) due to limited SNAP funds.

Activity Completed: \_\_\_\_\_

Amount reimbursed: \$\_\_\_\_\_.

**No Cost Incurred**

I did not incur transportation expenses for the month of \_\_\_\_\_ and am not requesting the food stamp reimbursement for the month.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

\_\_\_\_\_  
Participant Printed Name

\_\_\_\_\_  
Case Number

\_\_\_\_\_  
CSTB Career Counselor

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date