



LABELS MAKE CENTS REDEMPTION FORM

Church Name: _____

Please provide the following information for the individual filling out the form: *please print*

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ Email: _____

Year: _____ Quarter: [] 1st [] 2nd [] 3rd [] 4th

AGREEMENT

A total of _____ UPC/labels from the canned **Loma Linda** and **Worthington Foods** products have been collected, counted, verified, total reported on this form, and the UPC/labels destroyed.

No UPC/labels from any frozen foods have been included in the total as those are not eligible for \$0.25 from this food company.

A total of \$ _____ (\$0.25 for each UPC/label) should be collected by the Conference from Atlantic Natural Foods.

Signature of person filling out form: **X** _____ Date: _____

GUIDELINES

- Only UPC/labels from the eligible products named above can be reported on this form.
- **Eligible UPC/labels begin with 45561.**
- All eligible UPC/labels reported will be reimbursed at \$0.25 each.
- Payment will be made to the organization submitting the label redemption form.
- Funds received will remain with the submitting organization to be used for the worthy project chosen.
- Due dates: 1st quarter = Apr. 30; 2nd quarter = Jul. 31; 3rd quarter = Oct. 31; 4th quarter = Jan. 31
- **Mail church report form to: NCCSDA Labels Make Cents
P.O. Box 619015
Roseville, CA 95661-9015**

