## Fresh Fruit and Vegetable Program (FFVP) **Equipment Justification Form**



Schools must have advance approval for purchase of equipment using FFVP funds. Please complete and submit this form to <a href="mailto:edurbin@isbe.net">edurbin@isbe.net</a> or fax to (217) 524-6124.

FRUIT 8	Allow for at least two weeks for ISBE to process the request.  Once reviewed, ISBE will notify the listed FFVP contact person with a determination.  All equipment purchases must be made before December 31.					
VEGETABL		SCHOOL FOOD AUTH	ORITY R	RCDT / AGREEMENT NUMBER		
PROGRAI	School Bu	ilding / Site Name	,			
FFVP Contact Name		FFVP Contact Phone		FFVP Contact	FFVP Contact Email	
FFVP Equipment Requ	uested			Total Cost of	Requested Equipment	
Will this equipment b used 100% only for FF	If no, indicate percer equipment usage (to	-	FFVP %	Other Programs %		
Why is the current eq	uipment not suf	ficient?				
How many times are fruits and/or vegetables offered each week?			How many times do you receive deliveries each week?			
		ISBE USE	ONLY			
Received:	FFVP Allocation		☐ Approved☐ Denied			