

# AGENCY GOVERNING BODY AGREEMENT

AGENCY APPROVAL TO PARTICIPATE WITH  
THE COMMUNITY FOOD BANK OF CENTRAL ALABAMA



**We, the governing body of \_\_\_\_\_,**  
**give approval** to participate with the Community Food Bank of Central Alabama. We acknowledge our understanding of the guidelines set forth by CFBCA for food distribution to those in need and agree to comply with these guidelines in our food program henceforth.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Position Title*

\_\_\_\_\_  
*Signature*

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*Position Title*