

TOWN OF BOLTON

Welcome to the Bolton Food Pantry

Eligibility

The Food Pantry is available for Bolton residents of all ages. Eligibility is based on household income. All individuals residing in the home are included, regardless of age or relationship.

Household	1	2	3	4	5	6
Annual	\$36,168	\$47,304	\$58,428	\$69,564	\$80,688	\$91,812
Monthly	\$3,014	\$3,942	\$4,869	\$5,797	\$6,724	\$7,651

Hours of Operation

The Food Pantry is located at the Bolton Senior Center, 104 Notch Road. The building is open Monday through Thursday, 9 a.m. to 4 p.m. and Friday 9 a.m. to 3 p.m. Other arrangements can be made with advance notice.

Operating Procedure

Applications are confidential and remain on file. Renewal applications will be requested periodically to demonstrate continued eligibility. Participants must sign in with a staff member at each visit. Participants are welcome to visit the Food Pantry every week.

Available Items

The Bolton Food Pantry offers non-perishable foods including canned goods and other kitchen staples. Paper goods, toiletries and household cleaners are offered but inventory may vary. Please notify a staff member if you have a particular request.

Additional Help

The Bolton Social Services Department is happy to help with eligibility or applications for other programs and services. Please contact us at 860-647-9196 to schedule an appointment.

Bolton Social Services Staff

Carrie Concatelli, MSW, Director

Karen Frost, Secretary

Alice Hare, Secretary

TOWN OF BOLTON
Food Pantry Application

Date of Application: _____

Name: _____

Address: _____

Phone Number: _____

Household Members

Name	Date of Birth

Income

Include all income sources for all members of the household and how frequently it is received.

Income	Take Home Amount	How Often
Alimony		
Child Support		
Disability		
Employment Wages		
Friends/Family Contributions		
Rental Income		
Retirement/Pension/Annuity		
Self-Employment		
Social Security		
SNAP (Food Stamps)		
TANF, SAGA, SSI		
Worker's Compensation		
Unemployment		
Veterans Benefits		
Other (Please specify)		

Please provide staff with proof of each identified income source.

TOWN OF BOLTON
Food Pantry Application

Additional Information

Foods You Enjoy Most
Foods You Dislike
Allergies or Special Considerations
Any Other Requests
Non- Food Requests