			<u>309</u>	% NYS Initiave Applicat	ion Attachment	
			nting toward the 30% threshold and ntation on file and have readily avail		n column. Submit this completed document along wit	h the 30% NYS Attestation Statement to
SEA Nome					Total NYS Lunch Cost (\$): (pre-populates)	\$0.00
SFA Name					(pre-populates)	
SFA LEA Code						
Food Ite	m	Total NYS Lunch Cost (\$)	Proof of NYS: Documentation (select from drop down)	Is this a "Multi-Use" Item? (ex: used at both breakfast and lunch)	If Multi-Use, Describe how you separated the cost of the NYS item that was used at lunch	Comments

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