Instructions for On-Line Renewal

Review all information that has been "rolled" from the previous year, and update as needed. Information that rolls from year to year includes site's days, times, site kitchens, staff charts and other site information. **Budget** and **Advances** should not be addressed until all of the site information and the **Excess Fund Balance** has been entered.

Items in red are required information to be input before the sponsor is able to submit the renewal. Throughout the renewal whenever any data is input always click the 'Save' or 'Insert' button before continuing to the next step.

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	Spons	2010-11 sor Name - 55555555555555555555555555555555555	1. Complete ALL site information
	SFSP Region SFSP 9	e, Zip Code	2. Enter any leftover funds from last year under Excess Fund Balance
	Authorized Official Name Name General Phone (555) 555-5 Email address@d Fax (555) 555-5 Representative 1 Name Name Email Kanana	i555 Iomain.org 5555	3. Review and update both staff charts
	General Phone Fax Representative 2 Email General Phone Reservation 2		4. Complete the budget, if applicable
	Representative 3 Representative 4 Program Participation Summer Commodifies	Food Service Program	5. Request an advance
This paragraph lists all of the information that must be input or updated to	July not el	the second se	t <mark>ing Chart</mark> \$0 ting \$0
complete the renewal.	Indicate the composition of the area serv 100 percent. Total Racial Categories mu	viced by your agency. Total Ethnic (
You may have to input substantially more	Ethnic Categories Hispanic or Latino	0 American Indian or Alaska Na	ategories ative 0
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INDEX:

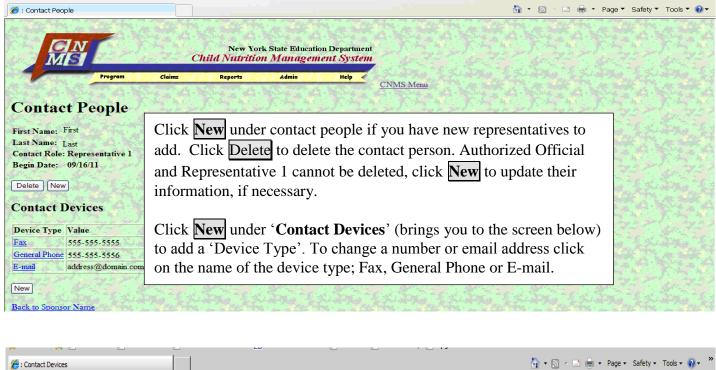
Advance - pg. 30 <u>Budget</u> - pg. 28-29 <u>Camp Sessions</u> - pg. 17-19 <u>Civil Rights Requirement</u> - pg. 30 <u>Commodities (USDA Foods)</u> - pg. 30 <u>Contact Information</u> - pg. 2-3 <u>Excess Fund Balance</u> - pg. 23-24

<u>Field Trip Notification</u>- pg.-21-22 <u>New Additions to Site Program Information</u>- pg.20-22 <u>Parent Letter/Media Release</u> – pg. 32 <u>Site Eligibility</u> – pg. 4 <u>Site Kitchen</u> – pg. 5-7 <u>Site Program Information</u> – pg. 10-16 <u>Sponsor Kitchens</u> – pg. 8-9 <u>Staff Charts</u> – pg. 24-27 From the **SFSP Renewal/Profile** screen (pg.1), clicking Authorized Official, Representative {1,2,3,4}, General Phone, Fax, or Email will bring up this screen.

You may choose to add or change **Contact People.** Click the 'New' button beneath the **Contact People** table and enter the appropriate information (see pg.3).

To update information for an existing contact role, click on the current person's Name in the table. Phone, fax numbers and E-mail addresses can be added or updated.

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Name	Contact Role	Begin Date		Click 'New' to add someone, representative 2 in this
First Last	Authorized Official	09/16/11		case, as a new contact role. To change the information
First Last	Representative 1	09/16/11	3. 1044 3	for an existing contact, including the name, click on
	- good they be	a site has to	3-1- D.	the person's name. The changes will be made on the following screens.
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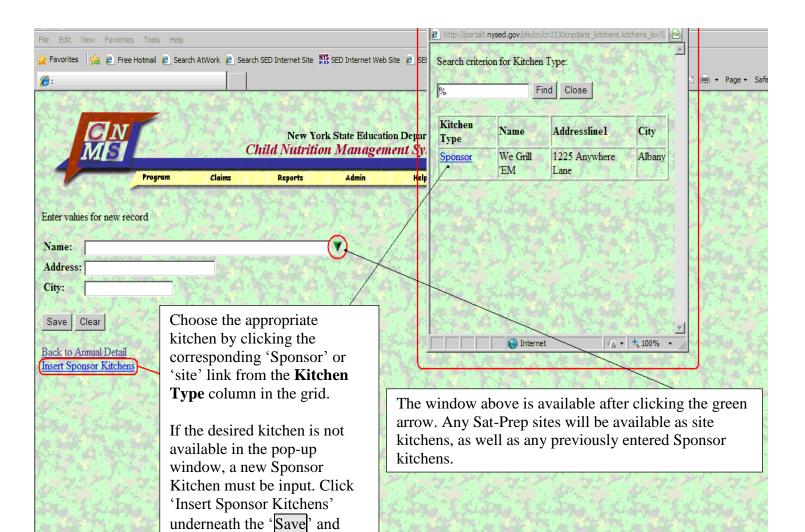
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Contact Devices Enter values for new Contact Devices record Device Type: Cell Phone • Value: Save Clear Back to People	Select the device type by clicking the down arrow that is to the right of the 'Device Type' box. Enter the phone number or email address in the ' Value ' box, click Save . Click New again on the same page to enter other contact device type information and click Save . Repeat until all information is entered. Return to the renewal (pg. 1)	

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Site Kitchen No Records returned	Beneath Site Kitchen , click New. This will bring up the screen on page 7.		
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'Clear' buttons to enter the information for a new Sponsor

Kitchen. (The Sponsor Kitchens page can also be accessed from the SFSP Profile page. 'Insert Sponsor Kitchens' is directly above the

first Site Information

table/chart.)

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For new Sponsor Kitchens input the r Click the Insert button at the bottom of		sponsor uses.	
Once completed, go back to the ' Rene	wal' screen.		
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New York State Education Department Child Nutrition Management System

Admin

Help

Reports

Back to Site Annual Information SFSP Renewal

Program

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Claims

Click the 'SFSP Program Information' link (pg. 10) in the site information chart to continue entering site information.

CNMS Menu

Enter the **Begin Date** and **End Date**, use the 'CAL' link to bring up a calendar to choose the date, and click '**Save**'. The date must be entered in MM/DD/YY format. **Camp sites will enter the Begin Date and End Date when they set up their Sessions.** See pg. 5 for the link to Sessions and pg. 18 for instructions.

Click the **New** button below 'Meal Types' on this same page to add a meal, or click the meal type (<u>Breakfast</u>, <u>Lunch</u>, <u>Supper</u>, <u>Supplement</u>, <u>Snack</u>) to change days and/or times.

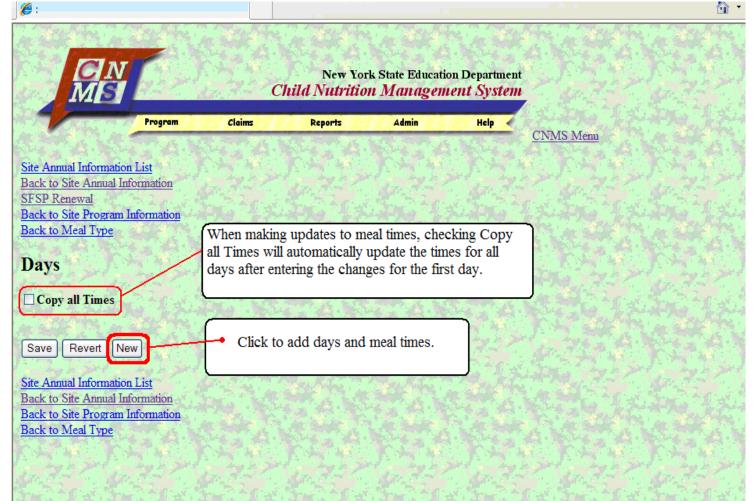
If deleting a meal, click on meal type, scroll down and click '**Delete**'. (Pg. 16)

If changing meal times, click on the **Meal** (<u>Breakfast, Lunch, Supper, Supplement, Snack</u>) then, on the next page (pg. 16), scroll to the bottom and click **Create Update Days**. Instructions for adding a new meal type.

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	Program	Claims	Reports	Admin	Help < CNMS Menu
Site Annual Information Li Back to Site Annual Inform Back to Site Program Info Meal Types	nation				Select which meal is being entered: Breakfast, Lunch, Supper, Snack or Supplement (camps only).
Rocks Franklind ROCCS Jerscolem 1			8		Make sure the menu option is correct.
Enter values for new recor Name:	d Breakfast				Flexible Offsite Consumption. Do you allow children to take the fresh fruit/vegetable component offsite? If so, check the FOC box.
Menu Option: FOC:	Summer Fo	ood Service Prog	gram Meal Pattern 😒		hoose Y or N for Offer vs. Serve from the drop down.
Offer vs. Serve: Projected # Eligibles: Participation/Enrollmen	Y	7.2.2. 74 J.E.	17-2-2-1 1-7-1-2-1 1-7-1-2-1-2-1-		Closed Enrolled in Non Needy Area sites only. The cted # eligible must be at least 50% of enrollment.
Points Of Service: Residential Campers: Day Campers: Other Campers:	2				number of children eating at this site for this meal. Enter mum expected at one time.
Save Clear Site Annual Information Li Back to Site Annual Inform Back to Site Program Info	st nation		of 'Points of		For Camp Sites Only Enter the type of campers that will be participating in the meal service.
Then click '	Save'.				

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1 0	information about a meal.	
SUCCESS! Row inserted		
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Site Name:	HOTER Truste a reve tobal	and the product of the product of the
LEA Code:	39906 Trible (1997)	
Sponsor Name:	The New MARY 124 Add 12	
LEA Code:	115000000000	
Site Type:	Open	Sponsors can update Flexible
School Year:	2011-12	Offsite Consumption, Participation,
Name:	Lunch	and/or Points of Service. Closed
Menu Option:	Summer Food Service Program Meal Pattern 💌	Enrolled in Non Needy Area sites
FOC:		-
Offer vs. Serve:		can update their Projected Number of Eligibles and Camp sites can
Projected # Eligibles:	the second second second second second second	update What Campers will
Participation/Enrollment:	120	participate. As always, click the
Meal ADP Waiver:	N	Save button before continuing.
Points Of Service:	2	Save button before continuing.
What Campers will Participate		
Residential Campers:	Hard Carlos Carlos Carlos	3. 7. 7. S. 3. 7. 7. S. 3. 7. 7.
Day Campers:		
Other Campers:		
other campers.		
Save Delete Revert Ne	Delete button from page 10. Use only	
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Site Annual Information List	HI MAR PAR MAR PAR MAR	They have been and they have a faith they
Back to Site Annual Information	and the second second second	and the second
Back to Site Program Information		



New York State Education Department Child Nutrition Management System Program Claims Reports Admin Help CNMS Menu

Site Annual Information List Back to Site Annual Information SFSP Renewal Back to Site Program Information Back to Meal Type

Days

Breakfast

Day		Begin Time	End Time	Ins
Monday	4	08:00AM	09:00AM	4
Tuesday	*	08:00AM	09:00AM	4
Wednesday	*	08:00AM	09:00AM	*
Thursday	*	08:00AM	09:00AM	4
Friday	۷	08:00AM	09:00AM	4
	*			
	۲			a.

Site Annual Information List Back to Site Annual Information Back to Site Program Information Back to Meal Type Enter the first **Day** of your meal service (Monday-Sunday) from the grey drop down tab.

Enter the **Begin Time** and **End Time** in the HH:MM(AM or PM) format

Then click the next day from the next drop down tab and the same **Begin Time** and **End Time** will automatically populate.

If you want a different time for each day, you will have to change the times manually.

After the correct times for each day are entered click **Save**'.

New York State Education Department Child Nutrition Management System

Admin

Reports

Site Annual Information List

Back to Site Annual Information SFSP Renewal Back to Site Program Information Back to Meal Type

If no other meal types are being added for this site click this link to get back to the main renewal page.

Days

Rows inserted	successfully: 5	6 A.
Day	Begin Time End Time	Insert?
~		Clear
Y		Clear
~		Clear
~		Clear

Program

Claims

After clicking save you will see "Rows inserted successfully" (highlighted). If there is an error with the format or some other error with the times, there will be an error message. Make sure the times are in the proper HH:MM(AM/PM) format, that no meal times overlap, and that supper doesn't begin after 7pm or end past 8pm.

Help

CNMS Menu

Click 'Back to Meal Type' link to add another meal type if needed.

For camps, click 'Back to Site Program Information' on the bottom of the page, see page 17.

Site Annual Information List Back to Site Annual Information Back to Site Program Information Back to Meal Type

Site Annual Information List Back to Site Annual Information SFSP Renewal Back to Site Program Information

Meal Types

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LEA Code:	412005/19201/
Sponsor Name:	in the second
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Site Type:	Open
School Year:	2011-12
Name:	Breakfast
Menu Option:	Summer Food Service Program Meal Pattern 😪 🕺
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Offer vs. Serve:	Y 🗸
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Day Campers:	
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Save Delete Revert N	To add another meal type, repeat the steps on pg. 15
Days	and the second sec
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Day Begin Time End	Time
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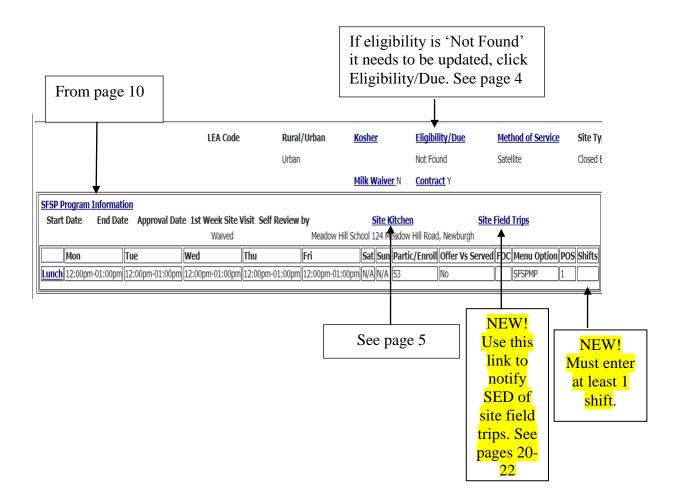


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Begin Date	- Cor	# Enrolled Residential Campers	# Eligible Residential Campers	# Enrolled Day Campers	# Eligible Day Campers	# Enrolled in Other State Program	# Eligible in Other State Program	Comments	Insert?	
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GN	N	w York State Education Depa	tment			
Program	sessions that w	ere input. If all ro	ws were not in	iserted success	uld be equal to th sfully make sure a sions do not have	all information
Create and Upd	days.					
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New Additions to Site Program Information

On the SFSP Renewal page, site information will have to be updated and reviewed. Make sure: Eligibility, Method of Service, Start Date and End Date, Days of Service, Meal Times, Site Kitchen, Kosher Option(if applicable), Offer vs. Served Option, Flexible Off-Site Consumption(FOC), number of Points of Service(POS), Number of Shifts for each Meal Service, Milk Waiver, and all other applicable information is correct for the current year, for each site. Update if needed. (Click on the name of the meal [Breakfast, Lunch, Supper, or Supplement] to bring up the screen to make updates by meal. For Camp sites the Start Dates and End Dates are set through sessions. See pg. 5 and pg. 17 for links to access the 'Sessions' page.



The Site Field Trip Link will bring you to this screen.

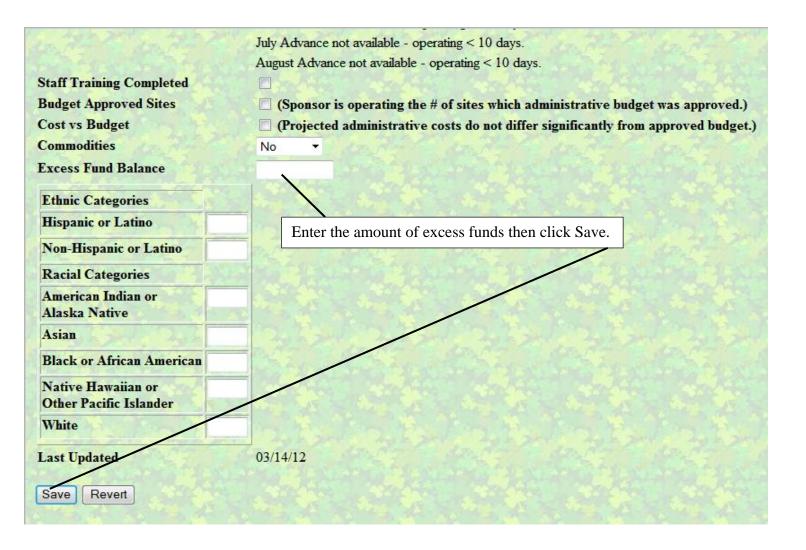
Site Kitchen
Name Kitchen Type Address City End Date County
Record 1 of 1
New
Field Trip Notification No Records returned New
Claims Information Program Name View/Revise Summer Food Service Program View
Site Programs
Program Name Approval Date Begin Date End Date End Participation Date
Record 1 of 1
New

Field Trip Notification

Save

All fields are required. All times should be entered in HH:MIAM format. Success! Field Trip Date must be requested 24 hours in advance. If a Row inserted Site name & LEA date less than 24 hours from the current date is entered, the Site Name: Code will be here following error message will appear: Site LEA Code: Date of Trip: 07/07/15 CAL "Field Trip Date must be requested 2 days in advance. Call Destination: Fun Time Water Park the SFSP Office at 518 486-1086 to request this trip." Street: 22 Fun Lane Enter the Date of the Trip, use the 'CAL' link to bring up a City: Funville calendar to choose the date. The date must be entered in State: NY MM/DD/YY format. Zip: 12345 Departure Time: 09:00AM **Return Time:** 03-00PM # of Children Attending: 54 Meals Being Served at Trip Site: Ν Breakfast Served: Breakfast Begin Time: Breakfast End Time: Lunch Served: ✓ Enter the Departure Time, Return Time and the Beginning Lunch Begin Time: 12:00PM and End Time of each meal that will be served on the day of Lunch End Time: 01:00PM the field trip in the HH:MM(AM or PM) format Snack Served: Snack Begin Time: Snack End Time: Supper Served: Supper Begin Time: Supper End Time: Are All Child Attending: Y۷ Children Served at Normal Site: NV Indicate how you plan to safely transport How are Meals Transported to trip site: In coolers with ice the meals and comply with all food safety standards. By checking this box I hearby assure that: 🗹 1. Only meals served to eligible children will be claimed for reimbursement 2. All meals will meet meal pattern requirements Check the box to agree to comply 3. All meals wil be properly supervised with these four 4. Safe food handling procedures will be implemented during transportation and service of meals requirements. Delete Revert New

	Representative 4 Program Participation	Summer Food Service Program	
	Commodities	No	
	Excess Fund Balance		
A Land	Staff Charts	Admin Chart \$1,656	Operating Chart \$8,482
	Budget	Admin \$0	Operating \$0
	<u>Advances</u>	June not eligible operating < 10 days	
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if there were no e be entered.	Indicate the composition of	acial Categories must equal 100 percen	



Staffing Charts:

For both Administrative and Operational Staff Charts:

All staff that do not have supervisory or managerial duties must be paid an hourly wage that is at or above the minimum wage, and be paid at least every 2 weeks. Refer to NYS Labor laws.

See page 25 of this document for the administrative staffing chart and page 26 for the operational staffing chart. All staff working with the SFSP need to be represented on the staffing chart. This includes workers that are volunteers or any staff paid from funds other than the SFSP reimbursement. For

small programs it is possible that one person works multiple positions, and can be entered as such.

Click 'New' to enter staff. This will allow up to five staff members to be added. If more than 5 positions are needed, save the first five, then click 'New' again to get five new available lines.

Use the drop down box to select the 'Position' of the staff being entered. If more than 1 worker has the same position, be indicated that in the 'Number of Staff in Position Column', indicate the number of Program Adults for each position in the 'Number of Program Adults Column' (Click here for guidance on Program Adults). Indicate what funds are being used to pay each position by selecting the category from the 'Paid By' drop down box:

'Hourly' - the worker is paid hourly and at least some of their pay comes from the SFSP reimbursement. 'Salary' - the worker has a supervisory or managerial position is on salary, and at least some of their pay comes from the SFSP reimbursement. 'Non-SFSP Funds' - the worker is paid, but nothing from SFSP reimbursement.

'Volunteer' – the worker is an unpaid volunteer.

Indicate the worker's hourly wage in the 'For staff paid hourly, enter wage or Begin wage range (to)' column. If more than one worker is in a position, and each have different hourly wages, indicate the wage using the 'For staff paid hourly enter wage or **Begin wage range** (to)' and 'End wage range' columns. If any fringe benefits are paid using SFSP reimbursement indicate the amount in the 'Fringe Benefits' column. In the 'Total Cost Attributed to the SFSP' column include the total of wages and fringe benefits being paid out of the SFSP reimbursement.



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Program	Claims	Reports	Admin	Help	1 July - Tale					
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Administrative Staff Cl	hart	A WELL	K. A.			N.A.	5 4 4 4 A			

Total Cost Attributed to Insert? Number of Staff In Number of For staff paid hourly enter wage or End wage Fringe Paid By Position **Program Adults** the SFSP Benefits Position Begin wage range (to) range ~ v 0 0 Clear to × v 0 Clear 0 to Message from webpage v X 0 0 Clear Clear ¥ 0 0 Enter required Administrator information first ~ 0 Clear 0 OK Save Use these links to go between the Staffing Charts. **Operational Staff Chart** 'Back to Annual Detail' links to the 'SPONSOR Administrative Staff Chart ANNUAL INFORMATION' page. Back to Annual Detail

Administrative Staff Chart:

Review the general staffing chart instructions on pg. 24 before continuing.

Start by clicking the Admin Chart (**Administrative Chart**) in blue from the Renewal (SFSP Profile) screen.

First, you will be prompted to enter an Administrator. (This could be your Authorized Official or Superintendent).

Enter all Administrative Employees working on the SFSP Program. Use the drop down boxes.

Then click Save.

The total of the Total Cost Attributed to the SFSP will automatically populate the Salaries/Fringe Benefits item of the Administrative Costs column on the budget.

An error will occur if more than 15% of projected reimbursement is allocated to Administrative Costs, including salaries.

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Program Claims	Reports Admin	Help 🖌	CNMS Mem

Operational Staff Chart

Position	N	umber of Staff in Position	Nu		er of Program Adults	Paid By		and the second second	10 C	y enter wage or Begin ange (to)	End wage range	Fringe benefits	Total Cost to SFSP	Insert?
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Kitchen Help 😽	Ķ	1	al and	[1		I lourly	٣	+++10,	7.25	to	7.35	100	3100	Y Clear
Driver	14	1		1		Hourly	۷	. Star	9.25	to	9.25	50	3000	🖌 Clear
Y							*			to		0	0	Clear

Save	
Operational Staff Chart	
Administrative Staff Chart	2.2
Back to Annual Detail	12

Use these links to go between the Staffing Charts. 'Back to Annual Detail' links to the 'SPONSOR ANNUAL INFORMATION' page.

Operational Staff Chart:

Review the general staffing chart instructions on pg. 21 before continuing.

Next enter the operational staff by clicking the **Operational Staff Chart** in blue.

You will need to enter in your Site Supervisor first.

After completing the chart click 'Save'.

To return to the renewal page, click **Back to Annual Detail** tab, then, on the new page, click on the **SFSP Renewal** tab, which will be towards the top of the page.

Now you may enter your Budget.

		SFSP P1 2010-			
		2010-			
		2010-			
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	3-1-5	Strate State	Carlo Carlos States	a south from the	Contractor and
		Approval I	Date:		
Address	AA	Street Address		4.6.4.64	
	11.51	City, State Zip Code	S. A. A. A. A. A. A. A.		A STATE
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General General	Phone				
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a set of the set of the set of the set	Natio	nal School Lunch Program(N	SLP) - Click Here for Profile		
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· \$ 100% ·

Based on program operating dates and projected participation, current year federal program reimbursement is \$24,042. Please indicate how this money along with the reported excess fund balance of \$1,000 will be allocated to projected allowable program costs by completing the budget. The amount of reimbursement attributable to administrative costs cannot exceed \$3,756. Total budget (Administrative Costs + Operating Costs + Excess Fund Balance) cannot exceed \$25,042. Excess funds may not be used to increase salary or fringe benefit costs when the sole purpose of the increase is to reduce a nonprofit food service program balance.

Administrative Costs		Operational Costs (Sites)	
Salaries/Fringe Benefits	1656	Food Service Labor/Fringe Benefits	8482
Rent for Office Space	þ	Food	0
Office Supplies	0	Non-Food Supplies	0
Administrative Mileage	0	Transportation of Food	0
Audit Fees	0	Utilities	0
Telephone	0	Equipment Rental	0
Postage	0	Depreciation of Non-Expendable Equipment	0
Printing/Copying	0	Kitchen Rental	0
FSMC Bid Advertisement	0	Truck Rental	0
Insurance	0	Refuse Removal	0
Indirect Costs	0	Transportation Children (Rural Only)	0
		Equipment Repairs (normal maintenance only)	0

Payroll from the staffing charts for both **Operational** and **Administrative Costs** are automatically entered; a sum of the 'Total Cost Attributed...' columns from the respective staff charts.

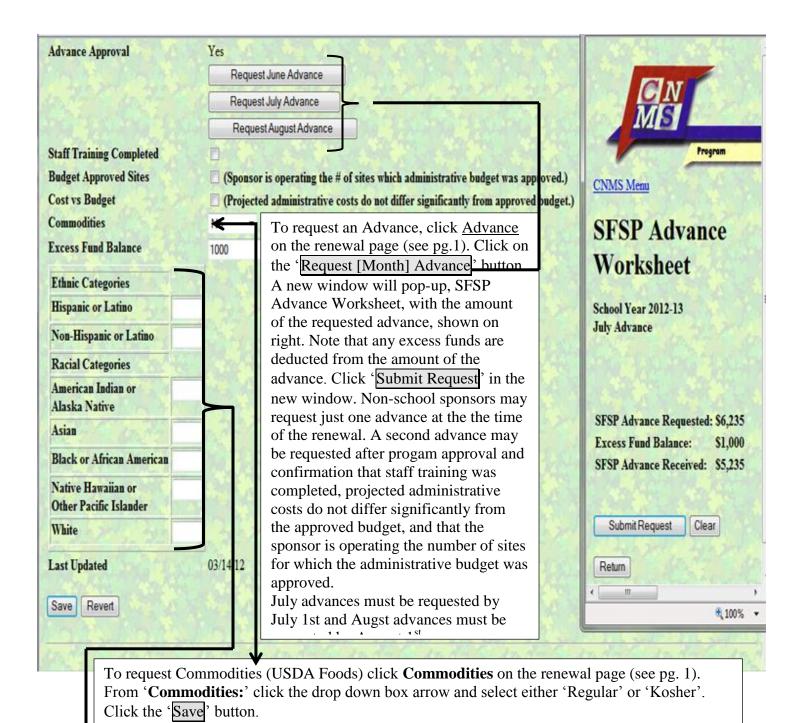
Enter the appropriate expenses keeping in mind at least 90%, and no more than 100% of the total projected reimbursement plus excess funds must be allocated, with no more than 15% directed towards Administrative Costs. The information above the chart that begins with 'Based on program operating...' has the maximum amount to budget and the maximum allowable for Administrative Costs.

Once you have completed the budget, print a paper copy for your records or manually record what was input then click the 'Save' button. Return to the SFSP Profile page to complete any other items, to request commodities (USDA Foods), or to request an advance. Make sure to update the budget before submitting the final claim for the summer.

Click **Back to Annual Detail** on the bottom of the page.

Then click SFSP Renewal on the top of the page.

Save



↓ Indicate the Ethnic and Racial breakdown of the area serviced by your area/institution (by percentage.) The two ethnic categories must total 100%; the five racial categories must total 100%. Click Save when finished.

On the SFSP Profile/Renewal screen (below), once everything that was in **RED** has been completed, a certification statement will replace the paragraph of necessary updates. Clicking the '**Agreement**' link will open the sponsor's agreement with SED that is available to view and/or print.

Please note: Your application has not be submitted until you click the 'Submit Updates' tab.

An email will be sent to the address on file to verify that the application has been submitted. School sponsors in good standing will get an email stating that their program has been approved.

🥖 : SFSP Renewal		🏠 🔹 🔊 👘 🖃 🖶 👻 Page 🐂 Safety 👻 Tools 🖲 🔞 💌 🎽			
Advances	Admin \$8,709 Operating \$45,100 June not eligible operating < 10 days July Advance not requested August Advance not requested				
submitting this Renewal, the sponsor deliberate misrepresentation or withhol		he best of my knowledge and that visions established in Section 12(g)			
of the National School Lunch Act [42 U.S.C. 1760(g)] that states substantiall grant or other form of assistance under this Act or the Child Nutrition Act of 1 whoever receives, conceals, or retains such funds, assets or property to persona shall, if such funds, assets or property are of the value of \$100 or more, be fined less than \$100, shall be fined	1966 (42 U.S.C. 1771 et seq.), whether received directly I use or gain, knowingly such funds, assets, or property ha	or indirectly from the United States Department of Agriculture, or we been embezzled, willfully misapplied, stolen, or obtained by fraud years, or both, or, if such funds, assets, or property are of a value of			
After reviewing all information on the	Submit Updates	新。大学·本英语、大学·本英语、大学·本英语、大学			
profile/renewal and reading the	School Lunch Program(NSLP) - Click Here for Profile				
certification statement, click the 'Submit					
Updates' button.	2011-12 SFSP Profile Annual Site Information	All Constant Constant Constants			
Insert Sponsor Kitchens					
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	<u>Milk Waiver</u> N	Contract N			
SFSP Program Information Click here if site not operating Start Date End Date Approval Date Ist Week Site Visit Sel 07/01/11 09/30/11 07/08/11 07/08/11 07/08/11	f Review by 07/28/11				

SFSP Profile

Renewal Instructions Media Release .

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1 29× 200 1	The trace of the the Shirt	1.000	the SFSP Profile page. Links will be	10.5
and the second	Sponsor Name - 5555555555	55	available for a 'media release' and the	
	Approval Date: 06/01/2011	1	'parent letter'. The media release link	
	Street Address		will open in a web page. The text, using	S.
Address	City, State, Zip Code	100	a word processing program, can then be	14 .
P. C. S. S. P.			copy and pasted onto the sponsor's	
SFSP Region	SFSP 9		agency letterhead. The parent letter link	-
Authorized Official	Name Name		will also open in a web page. The text	
General Phone	(555) 555-5555	12 miles	can be copy and pasted onto the	Ser
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Fax	(555) 555-5555			
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After the renewal is approved the date of

The U.S. Department of Agriculture prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request a form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

Individuals who are deaf, hard of hearing or have speech disabilities, may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).

USDA is an equal opportunity provider and employer.

In 10