

SNP Claim For Reimbursement Summary

Browning Public Schools

0400 Status: Active
 DBA: Browning Public Schools
 104 East Boundary St
 Browning, MT 59417-9998

Type of Agency: Educational Institution
 Type of SNP Organization: Public

Confirmation #: DEPCKE

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Mar 2026	0	04/10/2026	04/10/2026		Original

Sponsor Totals

Meal Type	Meals/Supplements Served	Federal Rate	Reimbursement Federal Amount
National School Lunch Program			
Free	19,029	4.6200	87,913.98
Reduced	0	4.2200	0.00
Paid	0	0.4600	0.00
Total	19,029		87,913.98
Performance-Based Reimbursement (Lunch)			
Claimed	19,029	0.0900	1,712.61
Adjusted	0	0.0900	0.00
Total	19,029		1,712.61
School Breakfast Program			
Free	375	2.4600	922.50
Reduced	0	2.1600	0.00
Paid	0	0.4000	0.00
Total	375		922.50
School Breakfast Program Severe Need			
Free	12,279	2.9400	36,100.26
Reduced	0	2.6400	0.00
Paid	0	0.4000	0.00
Total	12,279		36,100.26

Claim Reimbursement Total **126,649.35**

Sponsor Claim Reimbursement Totals

Current Claim Reimbursement Total	126,649.35
Previous Claim Reimbursement Total	0.00
Net Claim Reimbursement Total	126,649.35

[Show Site Meal Details](#)

Child & Adult Care Food Program Claim For Reimbursement Summary for March 2026

COUNTY OF GLACIER SCHOOL DIST 9/Browning Public Schools-AR

10154 Status: Active
 DBA: Browning Public Schools
 129 1st AVE SE
 Browning, MT 59417

Type of Agency: Indian Tribe
 Agreement Type: Independent Center

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Mar 2026	0	04/10/2026	04/10/2026		Original

Confirmation #: CGTHPA

At Risk Snack

Institution Totals	Meals/Snacks	Federal Rate	Reimbursement Amount
Supper			
Free	349	4.6000	1,605.40
CIL	349	0.3050	106.44
Total	349		1,711.84
Claim Reimbursement Total			1,711.84

Institution Claim Reimbursement Totals	Meal Reimbursement	CIL Reimbursement	Totals
Current Claim Reimbursement Total	1,605.40	106.44	1,711.84
Previous Claim Reimbursement Total	0.00	0.00	0.00
Net Claim Reimbursement Total	1,605.40	106.44	1,711.84

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