

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 #: AAHCI3

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Jan 2026	0	02/09/2026	02/09/2026		Original

Sponsor Totals

Meal Type	Meals/Supplements Served	Federal Rate	Reimbursement Federal Amount
National School Lunch Program			
Free	24,814	4.6200	114,640.68
Reduced	0	4.2200	0.00
Paid	0	0.4600	0.00
Total	24,814		114,640.68
Performance-Based Reimbursement (Lunch)			
Claimed	24,814	0.0900	2,233.26
Adjusted	0	0.0900	0.00
Total	24,814		2,233.26
School Breakfast Program			
Free	450	2.4600	1,107.00
Reduced	0	2.1600	0.00
Paid	0	0.4000	0.00
Total	450		1,107.00
School Breakfast Program Severe Need			
Free	17,832	2.9400	52,426.08
Reduced	0	2.6400	0.00
Paid	0	0.4000	0.00
Total	17,832		52,426.08

Claim Reimbursement Total **170,407.02**

Sponsor Claim Reimbursement Totals	
Current Claim Reimbursement Total	170,407.02
Previous Claim Reimbursement Total	0.00
Net Claim Reimbursement Total	170,407.02

[Show Site Meal Details](#)

Child & Adult Care Food Program Claim For Reimbursement Summary for January 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
Jan 2026	0	02/10/2026	02/10/2026		Original

Confirmation #: BCXAZX

At Risk Snack

Institution Totals	Meals/Snacks	Federal Rate	Reimbursement Amount
Supper			
Free	740	4.6000	3,404.00
CIL	740	0.3050	225.70
	Total		3,629.70
Claim Reimbursement Total			3,629.70

Institution Claim Reimbursement Totals	Meal Reimbursement	CIL Reimbursement	Totals
Current Claim Reimbursement Total	3,404.00	225.70	3,629.70
Previous Claim Reimbursement Total	0.00	0.00	0.00
Net Claim Reimbursement Total	3,404.00	225.70	3,629.70

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