

### 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 #: CIDOBC

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Mar 2025	0	04/10/2025	04/10/2025		Original

**Sponsor Totals**

Meal Type	Meals/Supplements Served	Federal Rate	Reimbursement Federal Amount
<b>National School Lunch Program</b>			
Free	25,739	4.4500	114,538.55
Reduced	0	4.0500	0.00
Paid	0	0.4400	0.00
<b>Total</b>	<b>25,739</b>		<b>114,538.55</b>
<b>Performance-Based Reimbursement (Lunch)</b>			
Claimed	25,739	0.0900	2,316.51
Adjusted	0	0.0900	0.00
<b>Total</b>	<b>25,739</b>		<b>2,316.51</b>
<b>School Breakfast Program</b>			
Free	376	2.3700	891.12
Reduced	0	2.0700	0.00
Paid	0	0.3900	0.00
<b>Total</b>	<b>376</b>		<b>891.12</b>
<b>School Breakfast Program Severe Need</b>			
Free	14,722	2.8400	41,810.48
Reduced	0	2.5400	0.00
Paid	0	0.3900	0.00
<b>Total</b>	<b>14,722</b>		<b>41,810.48</b>
<b>Claim Reimbursement Total</b>			<b>159,556.66</b>

**Sponsor Claim Reimbursement Totals**

Current Claim Reimbursement Total	159,556.66
Previous Claim Reimbursement Total	0.00
<b>Net Claim Reimbursement Total</b>	<b>159,556.66</b>

[Show Site Meal Details](#)



Child & Adult Care Food Program

Claim For Reimbursement Summary for March 2025

COUNTY OF GLACIER SCHOOL DIST 9/Browning Public Schools

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 2025	0	04/10/2025	04/10/2025		Original

Confirmation #: DIBAKK

At Risk Snack

Sponsor Totals	Meals/Snacks	Federal Rate	Reimbursement Amount
Supper			
Free	1,072	4.4300	4,748.96
CIL	1,072	0.3000	321.60
Total	1,072		5,070.56
Claim Reimbursement Total			5,070.56

Sponsor Claim Reimbursement Totals	Meal Reimbursement	CIL Reimbursement	Totals
Current Claim Reimbursement Total	4,748.96	321.60	5,070.56
Previous Claim Reimbursement Total	0.00	0.00	0.00
Net Claim Reimbursement Total	4,748.96	321.60	5,070.56

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