



CLICS 2

Logout

Kathy Faust

Sponsor: 100005098

Crosslake Community School

Create New
ClaimsView or
Modify ClaimsInterface
Claim FileClaim
Summary

Claims > CACFP Claim Maintenance

Applications

Changes have been accepted

Claims**Child and Adult Care Food Program (CACFP) Claim Information****User Information**

Site 100005374 - Crosslake Community School

Payment

Calendar Year 2021 Month April

Verification Reporting

Claim Type Original Claim Status Submitted

Direct Certification**FDP****Regular CACFP Meal Service Information**

Average Daily Attendance	Number of Days Served	Number of Participants Approved for Free or A Meals	Number of Participants Approved for Reduced Price or B Meals	Number of Participants Approved for Paid or C Meals	For-Profit Center Only - Claiming Percentage for Eligibility*
0	0	0	0	0	0

Total Reimbursable Meals Served

Breakfast	Lunch	Supper	Morning Snack	Afternoon Snack	Evening Snack
0	0	0	0	0	0

At-Risk Afterschool Care Meal Service Information

Average Daily Attendance	Number of Days Served	At-Risk Afterschool Snack	At-Risk Breakfast	At-Risk Lunch	At-Risk Supper
8	21	157	0	0	0

***For-Profit Child Care Sponsors:** each for-profit center must demonstrate that during the claiming month no less than 25% of enrolled participants or licensed capacity, whichever is less, were Title XX beneficiaries; or were approved for free or reduced-price meals.

To determine eligibility for claiming:

1. Total the number of children in attendance this month receiving Title XX benefits or total the number of children in attendance this month approved as category A and B.
2. Divide the number from step 1 by either the total enrollment in attendance or the licensed capacity, whichever is less. Round down to the whole number.

***For-Profit Adult Day Care Sponsors:** each for-profit center must demonstrate that no less than 25% of enrolled participants were Title XIX or XX beneficiaries during month claimed.

To determine eligibility for claiming:

1. Total the number or participants in attendance receiving Title XIX/XX benefits during the month.
2. Divide the number from step 1 by the total enrollment in attendance. Round down.

Sponsoring Authority Certification

I hereby take full responsibility for ensuring that this claim accurately represents the number of meals/milks served by reimbursement category, that records are available to support this claim, that



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Applications	Changes have been accepted		
Claims	Summer Food Service Program - Non-Camps Claim Information		
User Information	Site	1000005374 - Crosslake Community School	
Payment	Calendar Year	2021	Month April
Verification Reporting	Claim Type	Original	Claim Status Submitted
Direct Certification			
FDP			
	Meals Information		
		Number of Days Served *	Total Reimbursable Meals Served
	Breakfast	21	1090
	Lunch	21	1978
	Supper	0	0
	Morning Snack	0	0
	Afternoon Snack	0	0
	*For sites located in a non-eligible area, sponsors must demonstrate that for each day claimed 50% or more of the participants are from households that meet the income eligibility guidelines for free and/or reduced meals.		
	Sponsoring Authority Certification		
	I hereby take full responsibility for ensuring that this claim accurately represents the number of meals/milks served by reimbursement category, that records are available to support this claim, that this claim is in accordance with the Program Agreement, and that payment therefore has not been received. I understand that this information is being given in connection with the receipt of federal funds, that officials of the U.S. Department of Agriculture and the Minnesota Department of Education may verify this information, and that deliberate misrepresentation may subject me to prosecution under applicable state and federal criminal statutes.		
	View Details		Save

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