

Sample Letter to Provider

Dear Provider:

The attached forms are utilized for Tier I reimbursement for meals served in your day care home under the Child and Adult Care Food Program (CACFP). The children you serve may be reimbursed at the Tier I rate based on your household income or receipt of categorically eligible program benefits. To apply for Tier I rates, you must complete and return the enclosed Income Eligibility Statement. **You must also submit verification of the information provided on the application.** The form will be placed in our files and treated as **confidential** information. The statement must be completed as follows:

First — Does the provider's household qualify based on other programs?

Food Stamp/Food Distribution Program on Indian Reservations (FDPIR) Households/also include Temporary Assistance for Needy Families (TANF) where it applies: If your household currently receives food stamps, FDPIR benefits or TANF, you are automatically eligible to receive Tier I reimbursement. Therefore, you only have to list your name and food stamp, FDPIR or TANF identification number and sign the statement.

Second — If the provider's household is not eligible based on other programs:

If your household size/income is at or below the level shown on the enclosed scale, you are eligible for Tier I reimbursement. The following information must be included on the form:

- ◆ **Household members:** List the name of all household members, including spouse, children, parents or other persons who live with you in the same household.
- ◆ **Current income:** As a self-employed day care provider, you may list the net income that you earned in the last month or for the last year. Net income is defined as gross receipts (including all money received from parents for the care of their children **and** CACFP reimbursements) less operating expenses (such as the cost of food served to enrolled children). You must also list the gross income (before deductions for taxes, social security, etc.) earned by other household members for last month, the frequency of that income was received and where it is from, such as wages, retirement, or welfare. Child support and alimony should also be included. If the last month's income is not representative, last year's may be used.
- ◆ **Social Security Number:** List your social security number or if **you do not have a social security number, print "none."**
- ◆ **Signature:** You must sign the statement.

You are required to notify us if there is a change in the household size or an increase in income which exceeds \$50 per month or \$600 per year. If you list a food stamp, FDPIR or TANF number, you must notify us when you no longer receive these benefits. Similarly, you should notify us if a household member becomes unemployed and the amount of income lost during the period of unemployment.

You must provide verification of the information provided on your application. See the enclosure for the types of documentation that may be used as verification.

In the operation of USDA's food service program, no one will be discriminated against because of race, color, national origin, sex, age or disability. If you believe you have been discriminated against, write immediately to: Administrator, Food and Consumer Service, U.S. Department of Agriculture, 3101 Park Center Drive, Alexandria, VA 22302.

Sincerely,

Food & More, Inc.

Enclosures: Current Income Eligibility Guidelines
 Verification Information
 Provider Income Eligibility Statement
 Provider Income Eligibility Statement Instructions