

This is in a header so that it will show up on each page automatically. To type in the field, just double click in this area.

Agreement #: H-00-01

Sponsor Name: CACFP

Claims Revision Form

Claim Month: April 2016

Provider: Junie B Jones Amount: \$94.60

Provider: Patty Provider Amount: \$13.20

Provider: _____ Amount: _____

Provider: _____ Amount: _____

Provider: _____ Amount: _____

Provider: _____ Amount: _____

(Use another form if more spaces needed)

Total Revision:

<u>\$107.80</u>	Operating
<u>\$0.00</u>	Administrative
<u>\$107.80</u>	Total

This form is designed for you to be able to enter the info electronically more easily without the spacing changing and getting messed up, but you can always print the blank form and handwrite the info.

Nothing has really changed about this form except the format. All the same information is required as before. The only addition that I have made is the provider tier.

Agreement #: H-00-01

Sponsor Name: CACFP

Provider Name: Junie Jones

Provider Site Number: 001

Provider Tier: I

Each provider will need a table.
Hopefully this will make revisions less tedious. Notice that some of the boxes say N/A. They are pre-marked N/A on the blank form for you.

Item	Previous Claim	Revised Claim	\$ amount of change	Correct total
Number of days claimed	21	21	N/A	N/A
Breakfast	249	270	\$27.72	\$356.40
AM Snack	0	0	0	0
Lunch	234	255	\$52.08	\$632.40
PM Snack	228	248	\$14.80	\$183.52
Supper	0	0	0	0
Late Snack	0	0	0	0
Total operating revision	N/A	N/A	\$94.60	\$1172.32

Reason for Revision: received enrollment forms for child

Provider Name: Patty Provider

Provider Site Number: 777

Provider Tier: I

In the blank form, I've included 4 tables, should you need more, simply highlight this area, right click & select copy. Then go to your "Insert" tab & select "Blank Page". This will give you a new page. Go to that page, right click & select the first paste option (looks like a clipboard with a paintbrush). You can do this as many times as you need! Or if you handwrite these forms, just print several to keep on hand!

Item	Previous Claim	Revised Claim	\$ amount of change	Correct total
Number of days claimed	21	21	N/A	N/A
Breakfast	73	83	\$13.20	\$56.64
AM Snack	0	0	0	0
Lunch	96	96	0	\$145.96
PM Snack	147	147	0	0
Supper	0	0	0	\$52.08
Late Snack	0	0	0	0
Total operating revision	N/A	N/A	\$13.20	\$254.68

Reason for Revision: received enrollment forms for child