**Compiling the Monthly Claim Checklist**

The checklist below can be used as a quick reference when compiling your agency’s first claims. For detailed instructions see *Instructions for Completing the Reimbursement Claim Form* in Guidance 3 (for Child Care Centers or At-Risk / Emergency Shelters).

**BEFORE COMPILING THE MONTHLY CLAIM, PRINT THE CORRECT CLAIM WORKSHEET FOR YOUR AGENCY:**

* Child Care (CCI) and Outside of School Hours Care Centers (OSHCC) print and complete **PI-1489 claim worksheet**
* At-Risk Afterschool Programs (AR) and Emergency Shelters (ES) print and complete **PI-1489-B claim worksheet**

*(Sponsoring Organizations complete page 2; record totals on page 1)*

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| **Monthly Claim Checklist**   **CCI and OSHCC:** Total free, reduced, non-needy on HSIR, report on worksheet   Follow CACFP enrollment policy  (review attendance)   Valid HSIS are on file for children  claimed as free or reduced   **AR and ES:** All are free   Calculate ADA from attendance   Total number of days of service   Review Menus and cross off meals/snacks that do not meet CACFP requirements   Total meal counts on meal count forms (Children age 1+ AND Infants)  \* Do not claim meals and snacks  that do not meet requirements  *\* Greater than 3 Meals: Cross off*  *meals that exceed max allowed* | **Monthly Claim Checklist**   **CCI and OSHCC:** Total free, reduced, non-needy on HSIR, report on worksheet   Follow CACFP enrollment policy  (review attendance)   Valid HSIS are on file for children  claimed as free or reduced   **AR and ES:** All are free   Calculate ADA from attendance   Total number of days of service   Review Menus and cross off meals/snacks that do not meet CACFP requirements   Total meal counts on meal count forms (Children age 1+ AND Infants)  \* Do not claim meals and snacks  that do not meet requirements  *\* Greater than 3 Meals: Cross off*  *meals that exceed max allowed* | **Monthly Claim Checklist**   **CCI and OSHCC:** Total free, reduced, non-needy on HSIR, report on worksheet   Follow CACFP enrollment policy  (review attendance)   Valid HSIS are on file for children  claimed as free or reduced   **AR and ES:** All are free   Calculate ADA from attendance   Total number of days of service   Review Menus and cross off meals/snacks that do not meet CACFP requirements   Total meal counts on meal count forms (Children age 1+ AND Infants)  \* Do not claim meals and snacks  that do not meet requirements  *\* Greater than 3 Meals: Cross off*  *meals that exceed max allowed* |
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