# Attachment T11. Fiscal Acti

This information is being collected from State agencies, school food authorities, schools. This is a revision of a currently approved information collection. The Richard B. Russell National School Lunch Act (NSLA) 42 U.S.C. § 1758, as amended, authorizes the National School Lunch Program (NSLP). This information is required to administer and operate this program in accordance with the NSLA. Under the Privacy Act of 1974, any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0006. The time required to complete this information collection is estimated to average 47.5 hours of reporting burden per response. The burden consists of the time it takes for the State agency to conduct the off-site portion of the review which includes scheduling of the review and the completion of the Off-site Assessment, Resource Management Risk Indicator, and Site Selection Tools. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Services, Office of Policy Support, 3101 Park Center Drive, Room 1014, Alexandria, VA 22302, ATTN: PRA (0584-0006). Do not return the completed form to this address.

on Workbook

**Review Information:**

**Month Being Reviewed:**

**Period:**

**SFA Name:**

| No. | Name of Site | 4: Number of Meals ( | |
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| | | FREE | REDUCED PRICE |
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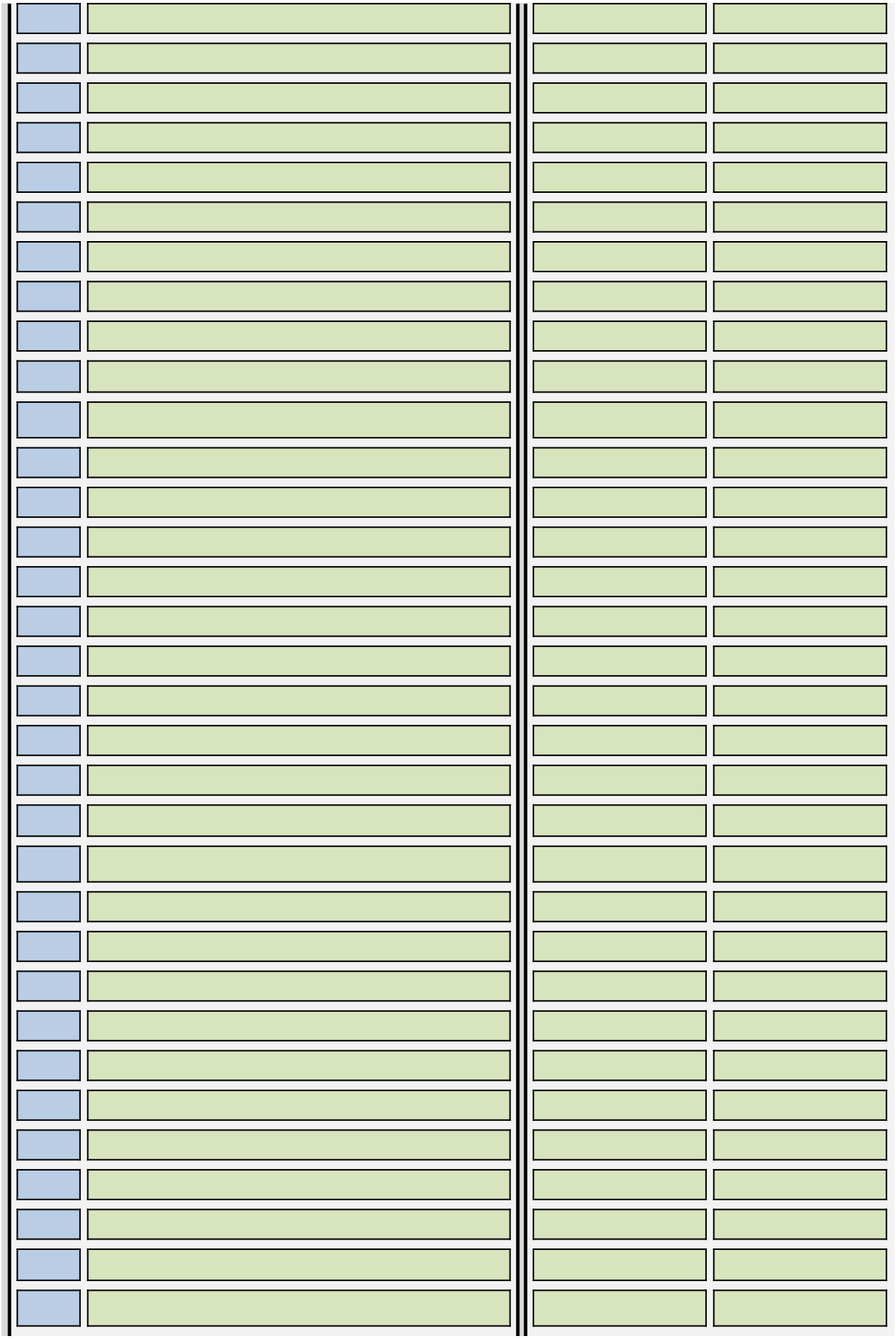

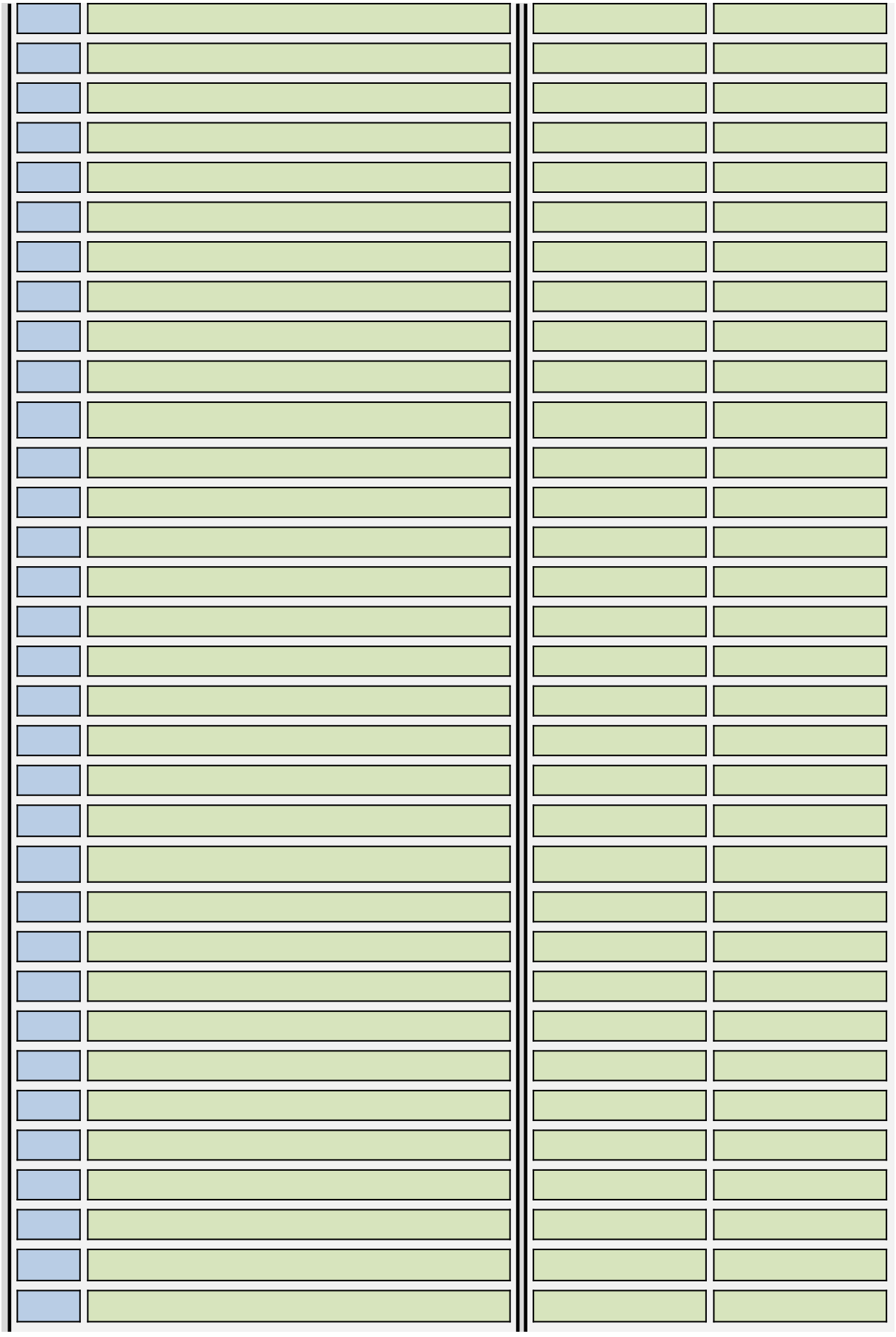

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## Attachment T11. Fiscal Action Workbook OMB#0584-

### For Non-Provision Schools and Base-Year Provision 2

| 1: Establish SFA Count of Reviewed Students | | |
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| | FREE | REDUCED PRICE |
| **SFA Count of Students Eligible for Free and Reduced-Price Meals:** | | |

| Claimed by the Site: | | 5A: Adjust for Consolidation Errors (Deductions): | | |
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| PAID | TOTAL | FREE | REDUCED PRICE | PAID |
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**0006 Expiration Date: xx/xx/20xx**

**& 3 Schools, FFVP, and ASSP**

**2: Establish SA Count of Reviewed Students**

| | | | | |
|---|---|---|---|---|
| **Free to Reduced** | | Free | **Error rates per type** | **Free to Reduced** |
| **Free to Paid** | | 0 | | **Free to Paid** |
| **Reduced to Paid** | | Reduced | | **Reduced to Paid** |
| **Reduced to Free** | | 0 | | **Reduced to Free** |

| 5B: Adjust for Consolidation Errors (Additions): | | | 6: Number of Meals Claimed Adjusted f Errors: | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
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| 0.000% | **3% Threshold Calculation** | |
| 0.000% | **Benefit Issuance Changes** | 0 |
| 0.000% | **CBI Error Percentage** | 0.00% |
| 0.000% | **3% Threshold Met or Exceeded** | NO |
| 0.000% | **Assess Fiscal Action** | YES |

| **3: TOTAL FISCAL ACTION FOR NSI** |
|---|
| **$0.00** |

| for Consolidation | 7: Total Non-Reimbursable Meals: | 8: Number of Reimbursable Meals by Benefit | | |
|---|---|---|---|---|
| PAID | | FREE | REDUCED PRICE | PAID |
| 0 | | 0 | 0 | 0 |
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LP STANDARD:

| Type: | 9: Reimbursement Rates for Each Benefit Type: | | | 10: Reimburs |
|---|---|---|---|---|
| TOTAL | FREE | REDUCED PRICE | PAID | FREE |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
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11: SFA-wide Reimbursable Meals by Benefit Type A

| | TOTAL FREE |
|---|---|
| Section 8 Total | 0 |
| Free to Reduced | 0.00 |
| Free to Paid | 0.00 |
| Reduced to Paid | |
| Reduced to Free | 0.00 |
| Total Adjusted Meal Count | 0.00 |
| Rounded Total | 0 |
| Difference | 0 |

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djusted by Error Rate per Application Category

| TOTAL REDUCED | TOTAL PAID | TOTAL |
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12A: Adjustment to Meals per Site by

| Change in Free Meals | Change in RP Meals |
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| Category (CB&I) | 12B: Allowable Total Meals after Fiscal Action | | | 12C: Allowable To |
|---|---|---|---|---|
| Change in Paid Meals | Free | Reduced | Paid | Free |
| 0 | 0 | 0 | 0 | $0.00 |
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| otal Reimbursement after Fiscal Action | | 13: Total FFVP Reclaim (use a negative number): | 14A: Number of After School Snacks Adju = negative # or Added = positive #) for E | |
|---|---|---|---|---|
| Reduced | Paid | | FREE | REDUCED PRICE |
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| stments (Disallowed Each Benefit Type: | 14B: Reimbursement Rates for Each Benefit Type of After School Snack: | | | 14C: Total After School Snack Adjustment: |
|---|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID | |
| | $0.00 | $0.00 | $0.00 | $0.00 |
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**Review Information:**

**Month Being Reviewed:** **Period:**

**SFA Name:**

| No. | Name of Site | 4: Number of Meals ( | |
|---|---|---|---|
| | | FREE | REDUCED PRICE |
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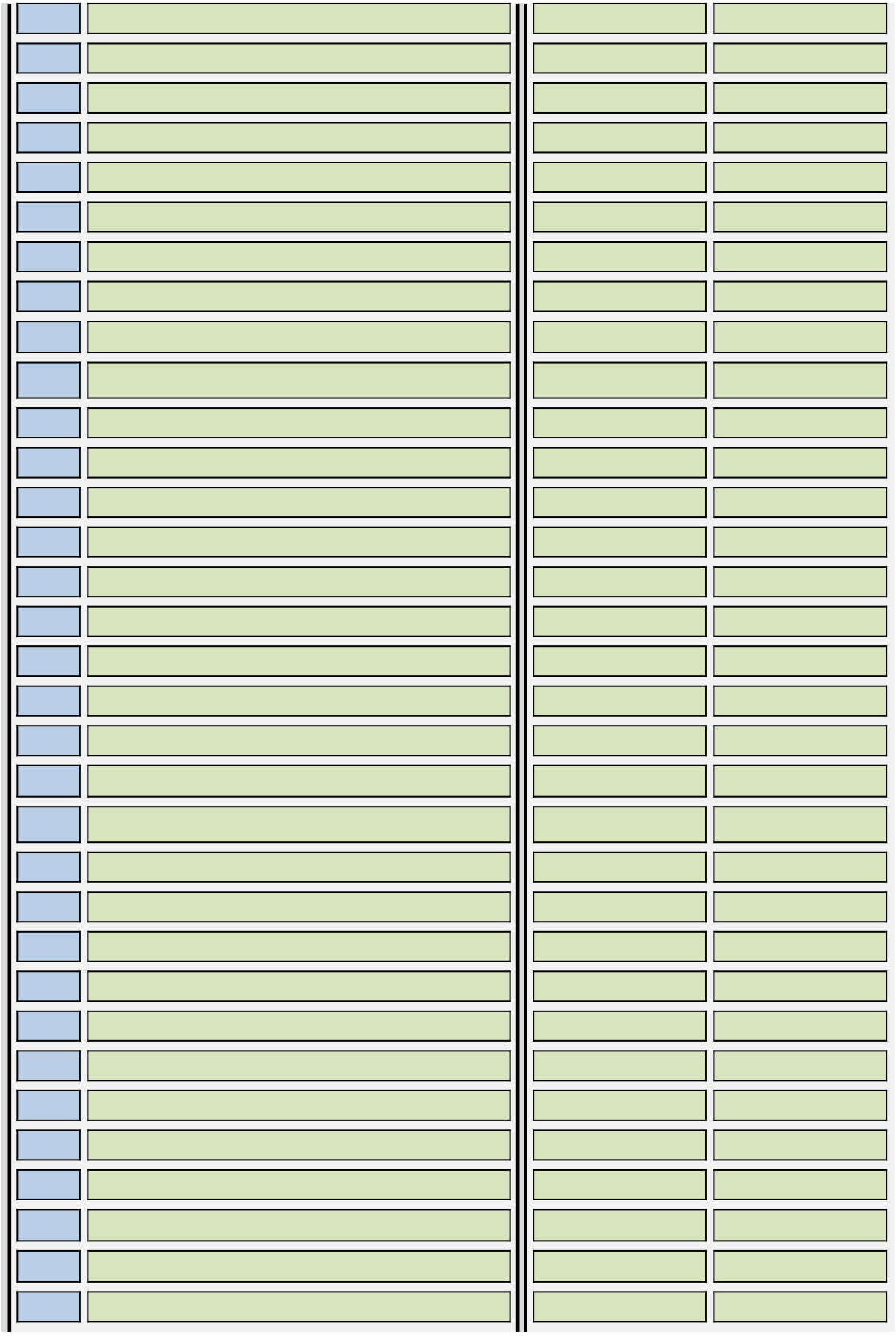

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| TOTALS: | | 0₱ | 0₱ |

## Fiscal Action Formula for Breakfast (

### For Non-Provision Schools and Base-Year Pro

**1: Establish SFA Count of Reviewed Students**

| | FREE | REDUCED PRICE |
|---|---|---|
| **SFA Count of Students Eligible for Free and Reduced-Price Meals:** | 0 | 0 |

| Claimed by the Site: | | 5A: Adjust for Consolidation Errors (Deductions): | | |
|---|---|---|---|---|
| PAID | TOTAL | FREE | REDUCED PRICE | PAID |
| | 0 | | | |
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## SBP) - Standard
### ›vision 2 & 3 Schools

**2: Establish SA Count of Reviewed Students**

| | | | | | |
|---|---|---|---|---|---|
| **Free to Reduced** | 0 | # | Free | | **Free to Reduced** |
| **Free to Paid** | 0 | | 0 | **Error rates per type** | **Free to Paid** |
| **Reduced to Paid** | 0 | | Reduced | | **Reduced to Paid** |
| **Reduced to Free** | 0 | | 0 | | **Reduced to Free** |

| 5B: Adjust for Consolidation Errors (Additions): | | | 6: Number of Meals Claimed Adjusted f Errors: | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
| | | | 0 | 0 |
| | | | 0 | 0 |
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| 0.000% | **Benefit Issuance Changes** | 0 |
| 0.000% | **CBI Error Percentage** | 0.00% |
| 0.000% | **3% Threshold Met or Exceeded** | NO |
| 0.000% | **Assess Fiscal Action** | YES |

**3% Threshold Calculation**

**3: TOTAL FISCAL ACTION FOR SB**

**$0.00**

| for Consolidation | 7: Total Non-Reimbursable Meals: | 8: Number of Reimbursable Meals by Benefit | | |
|---|---|---|---|---|
| PAID | | FREE | REDUCED PRICE | PAID |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
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P STANDARD:

| Type: | 9: Reimbursement Rates for Each Benefit Type: | | | 10: Reimburs |
|---|---|---|---|---|
| TOTAL | FREE | REDUCED PRICE | PAID | FREE |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| # 0 | | | | $0.00 |

ement Amounts Claimed by SFA:

| REDUCED PRICE | PAID |
|---|---|
| $0.00 | $0.00 |
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11: SFA-wide Reimbursable Meals by Benefit Type Adjusted by

| | TOTAL FREE | TOTAL REDUCED |
|---|---|---|
| Section 8 Total | 0 | 0 |
| Free to Reduced | 0.00 | 0.00 |
| Free to Paid | 0.00 | |
| Reduced to Paid | | 0.00 |
| Reduced to Free | 0.00 | 0.00 |
| Totaled | 0.00 | 0.00 |
| Rounded Total | 0 | 0 |
| Difference | 0 | 0 |

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| / Error Rate per Application Category | | 12A: Adjustment to Meals per Site by Category (CB&I) | | |
|---|---|---|---|---|
| TOTAL PAID | TOTAL | Change in Free Meals | Change in RP Meals | Change in Paid Meals |
| 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 |
| 0.00 | | 0 | 0 | 0 |
| 0.00 | | 0 | 0 | 0 |
| | | 0 | 0 | 0 |
| 0.00 | 0.00 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| | | 0 | 0 | 0 |
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| | 0 | 0 | 0 |

| 12B: Allowable Total Meals after Fiscal Action | | | 12C: Allowable Total Reimbursement a | |
|---|---|---|---|---|
| Free | Reduced | Paid | Change in Free Meals | Change in RP Meals |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
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| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
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| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
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| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
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| 0 | 0 | 0 | $0.00 | $0.00 |

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| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

| ıfter Fiscal Action | 13: Total Fiscal Action For |
|---|---|
| Change in Paid Meals | |
| $0.00 | **$0.00** |
| $0.00 | **$0.00** |
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**Review Information:**

**Month Being Reviewed:** **Period:**

**SFA Name:**

| No. | Name of Site | 4: Number of Meals ( | |
|---|---|---|---|
| | | FREE | REDUCED PRICE |
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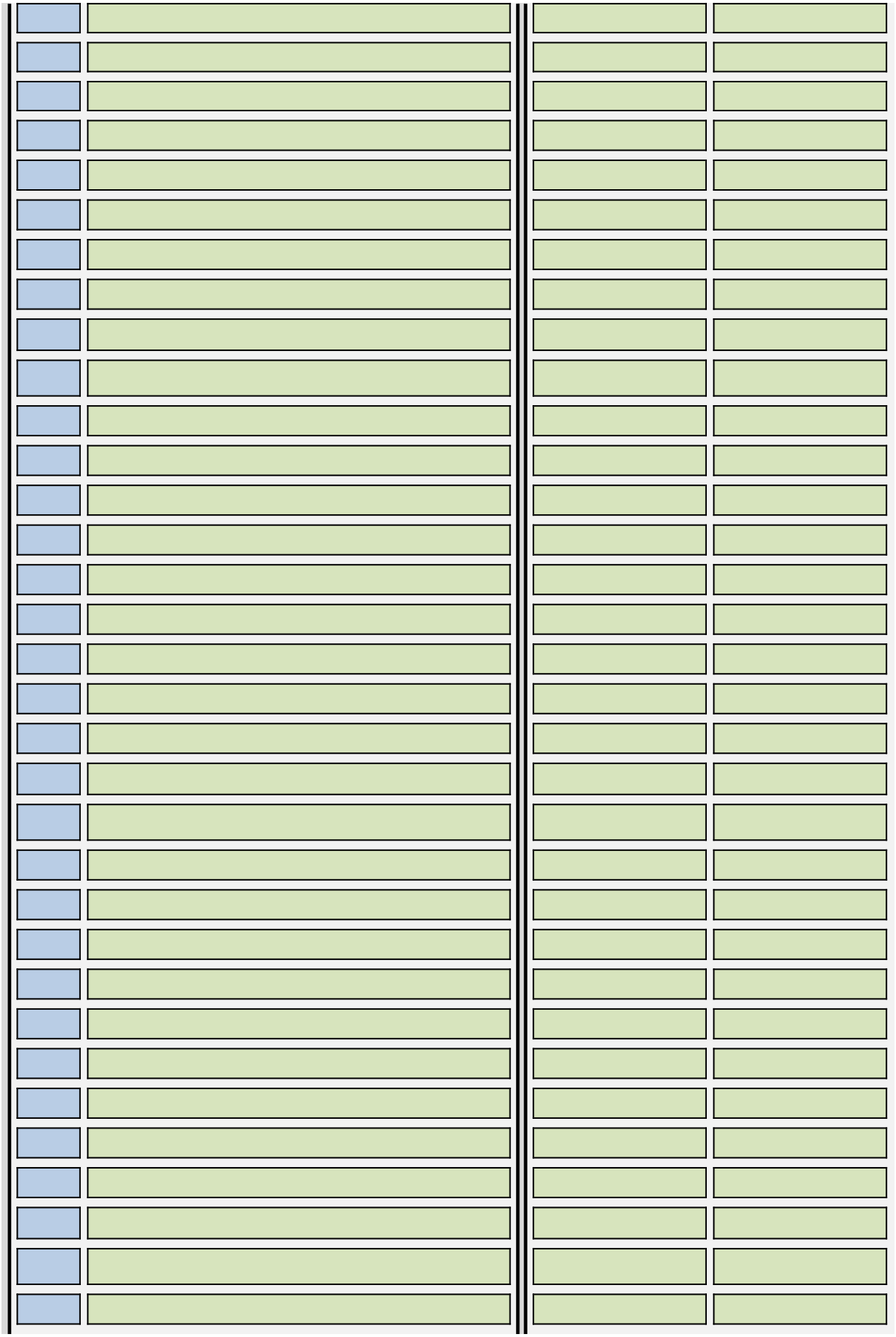

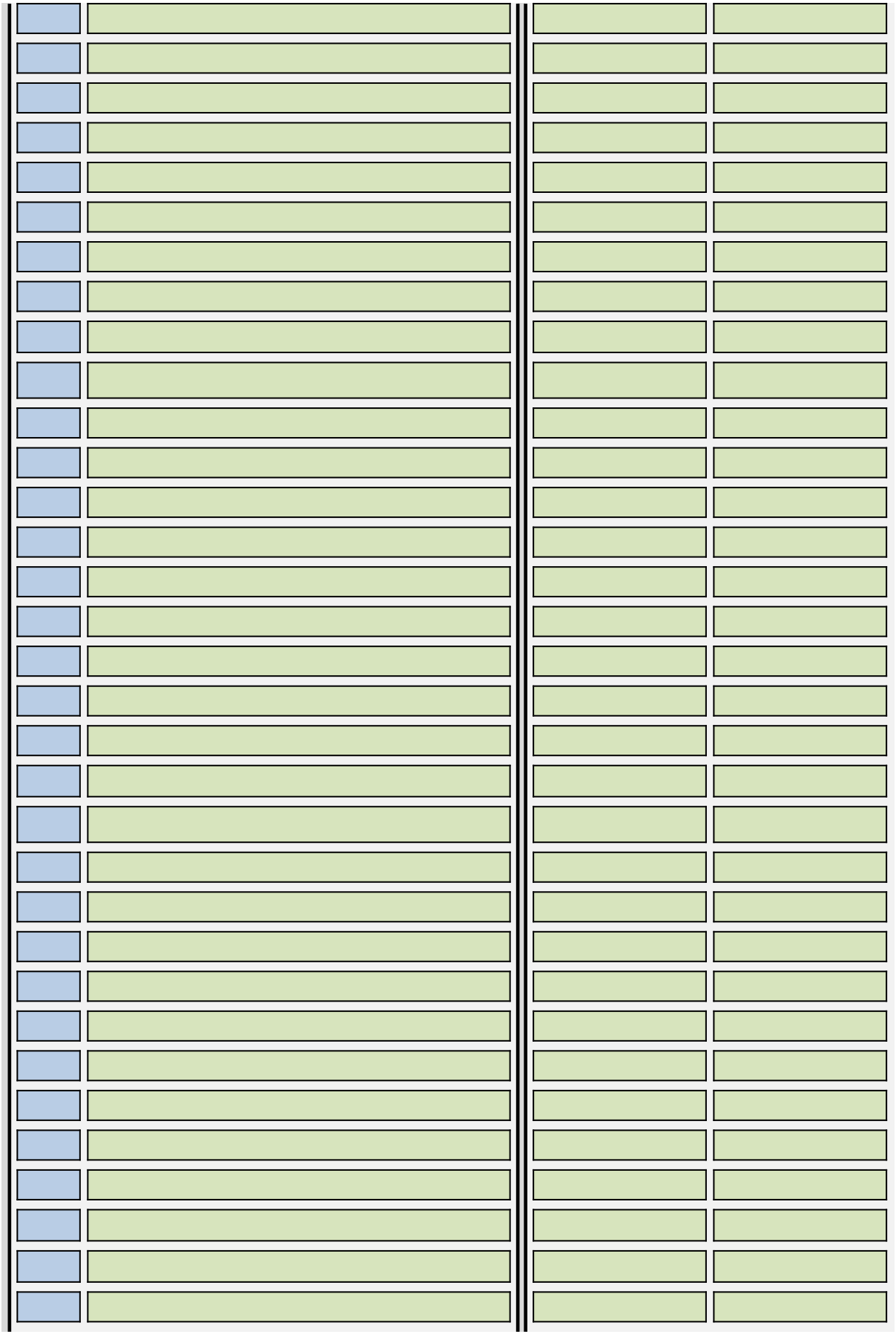

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# Fiscal Action Formula for Lunch (NSLP) - Seamless Summe

## For Non-Provision Schools and Base-Year Provisio

### 1: Establish SFA Count of Reviewed Students

| SFA Count of Students Eligible for Free and Reduced-Price Meals: | FREE | REDUCED PRICE |
|---|---|---|
| | | |

| Claimed by the Site: | | 5A: Adjust for Consolidation Errors (Deductions): | | |
|---|---|---|---|---|
| PAID | TOTAL | FREE | REDUCED PRICE | PAID |
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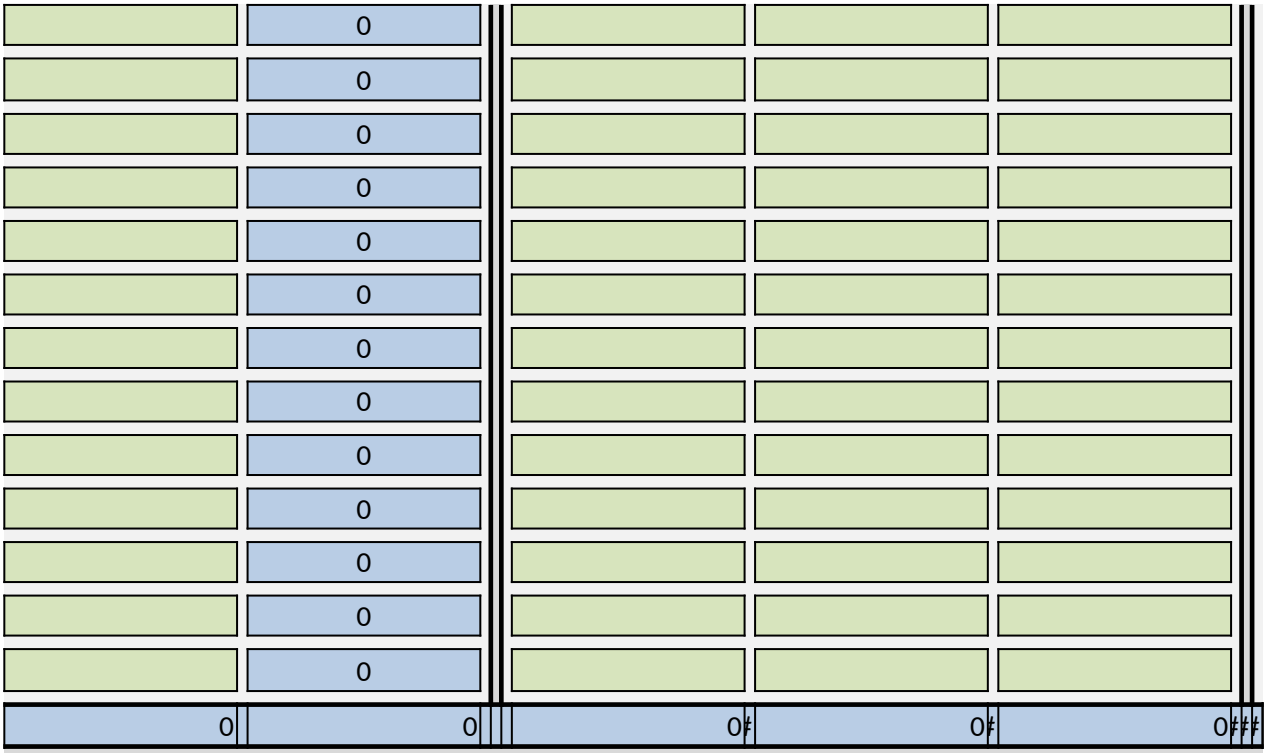
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## er Option (Closed and Migrant Sites)
### n 2 & 3 Schools and ASSP

**2: Establish SA Count of Reviewed Students**

| | | | | |
|---|---|---|---|---|
| **Free to Reduced** | | Free | **Error rates per type** | **Free to Reduced** |
| **Free to Paid** | | 0 | | **Free to Paid** |
| **Reduced to Paid** | | Reduced | | **Reduced to Paid** |
| **Reduced to Free** | | 0 | | **Reduced to Free** |

| 5B: Adjust for Consolidation Errors (Additions): | | | 6: Number of Meals Claimed Adjusted f Errors: | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
| | | | 0 | 0 |
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| 0.000% | **Benefit Issuance Changes** | 0 |
| 0.000% | **CBI Error Percentage** | 0.00% |
| 0.000% | **3% Threshold Met or Exceeded** | NO |
| 0.000% | **Assess Fiscal Action** | YES |

**3% Threshold Calculation**

**3: TOTAL FISCAL ACTION FOR NSI**

**$0.00**

| for Consolidation | 7: Total Non-Reimbursable Meals: | 8: Number of Reimbursable Meals by Benefit | | |
|---|---|---|---|---|
| PAID | | FREE | REDUCED PRICE | PAID |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
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| 0 | | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |

LP STANDARD:

| Type: | 9: Reimbursement Rates for Each Benefit Type: | | | 10: Reimburs |
|---|---|---|---|---|
| TOTAL | FREE | REDUCED PRICE | PAID | FREE |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |

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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |

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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |

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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | | | | $0.00 |

ement Amounts Claimed by SFA:

| REDUCED PRICE | PAID |
|---|---|
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
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| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |

11: SFA-wide Reimbursable Meals by Benefit Type A

| | TOTAL FREE |
|---|---|
| Section 8 Total | 0 |
| Free to Reduced | 0.00 |
| Free to Paid | 0.00 |
| Reduced to Paid | |
| Reduced to Free | 0.00 |
| Total Adjusted Meal Count | 0.00 |
| Rounded Total | 0 |
| Difference | 0 |

| | |
|---|---|
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
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| $0.00 | $0.00 |

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| $0.00 | $0.00 | |
| $0.00 | $0.00 | |
| $0.00 | $0.00 | |
| $0.00 | $0.00 | |

djusted by Error Rate per Application Category

| TOTAL REDUCED | TOTAL PAID | TOTAL |
|---|---|---|
| 0 | 0 | 0 |
| 0.00 | | |
| | 0.00 | |
| 0.00 | 0.00 | |
| 0.00 | | |
| 0.00 | 0.00 | 0.00 |
| 0 | 0 | 0 |
| 0 | 0 | |

12A: Adjustment to Meals per Site by

| Change in Free Meals | Change in RP Meals |
|---|---|
| 0 | 0 |
| 0 | 0 |
| 0 | 0 |
| 0 | 0 |
| 0 | 0 |
| 0 | 0 |
| 0 | 0 |
| 0 | 0 |
| 0 | 0 |
| 0 | 0 |
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| 0 | 0 |

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| 0 | 0 |
| 0 | 0 |
| 0 | 0 |

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| | 0 | 0 |
| | 0 | 0 |
| | 0 | 0 |
| | 0 | 0 |
| | 0 | 0 |
| | 0 | 0 |
| | 0 | 0 |

| Category (CB&I) | 12B: Allowable Total Meals after Fiscal Action | | | 12C: Allowable T |
|---|---|---|---|---|
| Change in Paid Meals | Free | Reduced | Paid | Free |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |
| 0 | 0 | 0 | 0 | $0.00 |

| | | | | | |
|---|---|---|---|---|---|
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |

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|---|---|---|---|---|---|
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |

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|---|---|---|---|---|---|
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |
| 0 | #.. | 0 | 0 | 0 | $0.00 |

| otal Reimbursement after Fiscal Action | | 13A: Number of After School Snacks Adjustments (Disallowed = negative # or Added = positive #) for Each Benefit Type: | | |
|---|---|---|---|---|
| Reduced | Paid | FREE | REDUCED PRICE | PAID |
| $0.00 | $0.00 | | | |
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| $0.00 | $0.00 | | | | |
| $0.00 | $0.00 | | | | |
| $0.00 | $0.00 | | 0 | 0 | 0 |

| 13B: Reimbursement Rates for Each Benefit Type of Snacks: | | | 13C: Total After School Snack Adjustment: | 14: TOTAL FISCAL AC |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | | |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
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| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
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| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
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| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |

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| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |

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| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
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| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
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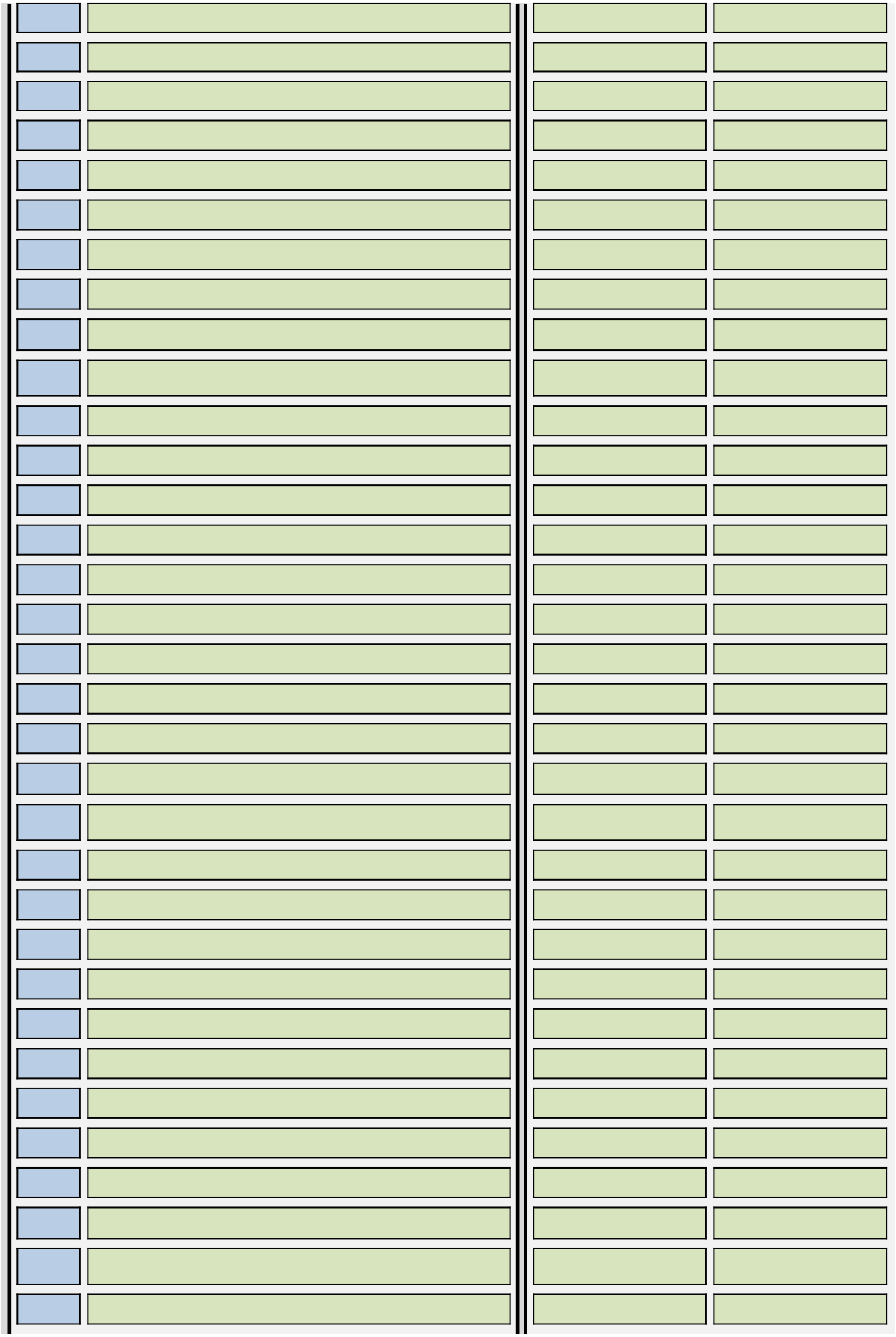
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | $0.00 | **$0.00** |
| | | | $0.00 | **$0.00** |

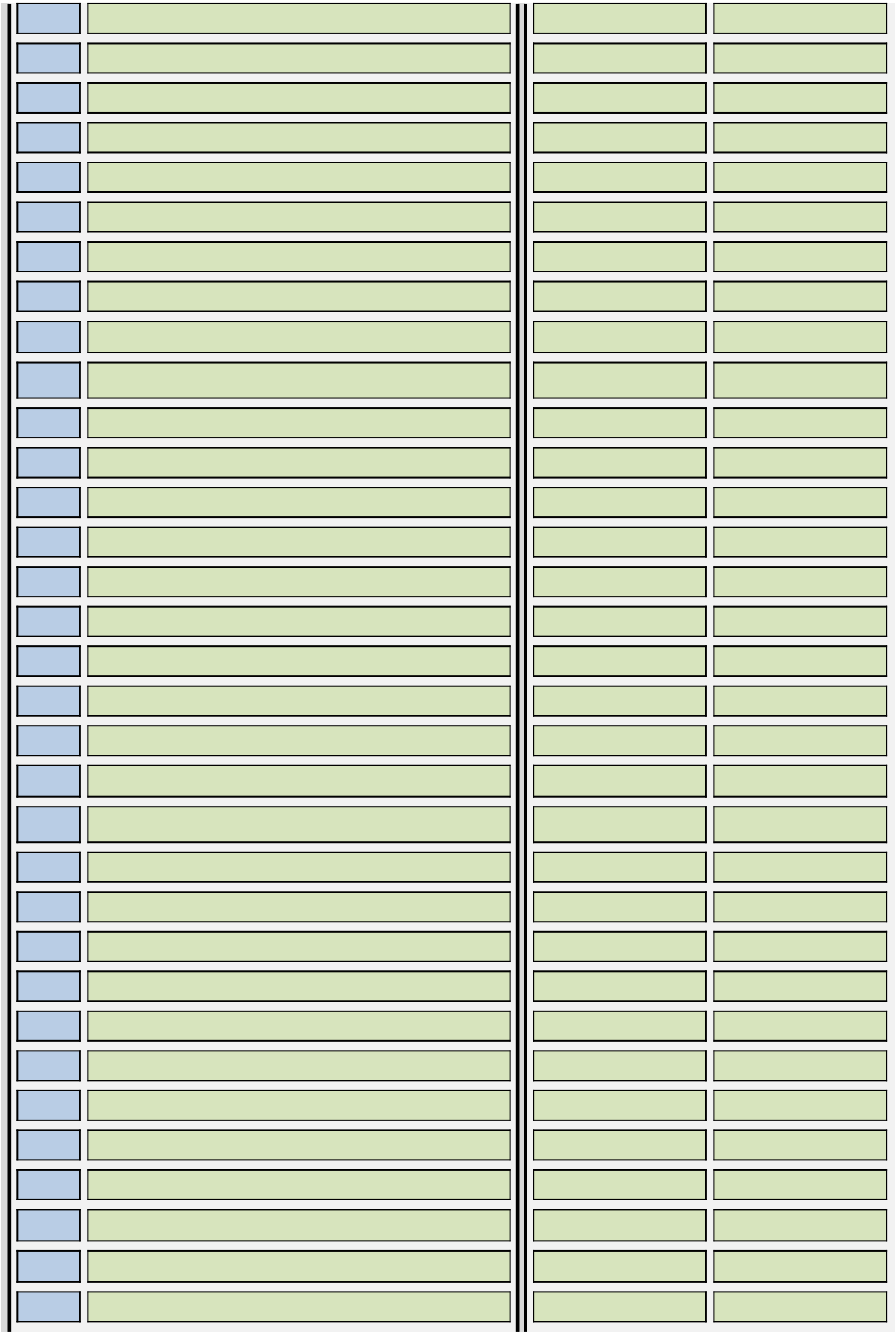
**Review Information:**

**Month Being Reviewed:** **Period:**

**SFA Name:**

| No. | Name of Site | 4: Number of Meals ( | |
|---|---|---|---|
| | | FREE | REDUCED PRICE |
| | | | |
| | | | |
| | | |





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| TOTALS: | | 0₽ | 0₽ |

# Fiscal Action Formula for Breakfast (SBP) - Standar

## For Non-Provision Schools and Base-Year Pro

### 1. Establish SFA Count of Reviewed Students

| | FREE | REDUCED PRICE |
|---|---|---|
| **SFA Count of Students Eligible for Free and Reduced-Price Meals:** | 0 | 0 |

| Claimed by the Site: | | 5A: Adjust for Consolidation Errors (Deductions): | | |
|---|---|---|---|---|
| PAID | TOTAL | FREE | REDUCED PRICE | PAID |
| | 0 | | | |
| | 0 | | | |
| | 0 | | | |
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| 0 | 0 | 0≠ | 0≠ | 0### |

## rd (Closed and Migrant Sites)
### vision 2 & 3 Schools

**2. Establish SA Count of Reviewed Students**

| | | | | | |
|---|---|---|---|---|---|
| **Free to Reduced** | 0 | ≠ | Free | **Error rates per type** | **Free to Reduced** |
| **Free to Paid** | 0 | ≠ | 0 | | **Free to Paid** |
| **Reduced to Paid** | 0 | ≠ | Reduced | | **Reduced to Paid** |
| **Reduced to Free** | 0 | ≠ | 0 | | **Reduced to Free** |

| 5B: Adjust for Consolidation Errors (Additions): | | | 6: Number of Meals Claimed Adjusted f Errors: | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
| | | | 0 | 0 |
| | | | 0 | 0 |
| | | | 0 | 0 |
| | | | 0 | 0 |
| | | | 0 | 0 |
| | | | 0 | 0 |
| | | | 0 | 0 |
| | | | 0 | 0 |
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| 0.000% | **Benefit Issuance Changes** | 0 |
| 0.000% | **CBI Error Percentage** | 0.00% |
| 0.000% | **3% Threshold Met or Exceeded** | NO |
| 0.000% | **Assess Fiscal Action** | NO |

**3% Threshold Calculation**

**3: TOTAL FISCAL ACTION FOR SB**

**$0.00**

| for Consolidation | 7: Total Non-Reimbursable Meals: | 8: Number of Reimbursable Meals by Benefit | | |
|---|---|---|---|---|
| PAID | | FREE | REDUCED PRICE | PAID |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
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P STANDARD:

| Type: | 9: Reimbursement Rates for Each Benefit Type: | | | 10: Reimburs |
|---|---|---|---|---|
| TOTAL | FREE | REDUCED PRICE | PAID | FREE |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |

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|---|---|---|---|---|
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |

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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |

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| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| 0 | $0.00 | $0.00 | $0.00 | $0.00 |
| # 0 | | | | $0.00 |

ement Amounts Claimed by SFA:

| REDUCED PRICE | PAID |
|---|---|
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
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| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |

11: SFA-wide Reimbursable Meals by Benefit Type Adjuste
Category

| | TOTAL FREE | TOTAL REDUCED |
|---|---|---|
| Section 8 Total | 0 | 0 |
| Free to Reduced | 0.00 | 0.00 |
| Free to Paid | 0.00 | |
| Reduced to Paid | | 0.00 |
| Reduced to Free | 0.00 | 0.00 |
| Totaled | 0.00 | 0.00 |
| Rounded Total | 0 | 0 |
| Difference | 0 | 0 |

| | |
|---|---|
| $0.00 | $0.00 |
| $0.00 | $0.00 |
| $0.00 | $0.00 |

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| $0.00 | $0.00 | |
| $0.00 | $0.00 | |
| $0.00 | $0.00 | |

| ed by Error Rate per Application | | 12A: Adjustment to Meals per Site by Category (CB&I) | | |
|---|---|---|---|---|
| TOTAL PAID | TOTAL | Change in Free Meals | Change in RP Meals | Change in Paid Meals |
| 0 | 0 | 0 | 0 | 0 |
| | | 0 | 0 | 0 |
| 0.00 | | 0 | 0 | 0 |
| 0.00 | | 0 | 0 | 0 |
| | | 0 | 0 | 0 |
| 0.00 | 0.00 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |
| 0 | | 0 | 0 | 0 |
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| 12B: Allowable Total Meals after Fiscal Action | | | 12C: Allowable Total Reimbursement a | |
|---|---|---|---|---|
| Free | Reduced | Paid | Change in Free Meals | Change in RP Meals |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

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| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

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| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

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|---|---|---|---|---|
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

| ıfter Fiscal Action | 13: Total Fiscal Action For |
|---|---|
| Change in Paid Meals | |
| $0.00 | **$0.00** |
| $0.00 | **$0.00** |
| $0.00 | **$0.00** |
| $0.00 | **$0.00** |
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| Review Information: | | | |
|---|---|---|---|
| **Month Being Reviewed:** | | **Period:** | |
| **SFA Name:** | | | |

| No. | Name of Site | 4: Number of Meals Claimed by SFA at t Requiring Recalculation | |
|---|---|---|---|
| | | FREE | REDUCED PRICE |
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# Fiscal Action Formula for Lunch (NSLP) - Standard *O

**For Non-Provision Schools and Base-Year**

## 1. Establish SFA Count of Reviewed Students

| | FREE | REDUCED PRICE |
|---|---|---|
| **SFA Count of Students Eligible for Free and Reduced-Price Meals:** | | |

| the Reviewed Site n: | 5: Number of Meals Claimed by SFA at the Reviewed Site for the 30-Consecutive-Operating-Day Recalculation Period: | | | |
|---|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID | TOTAL |
| | | | | 0 |
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**NLY USED FOR FULL RECALCULATION***

**Provision 2 & 3 Schools**

**2. Establish SA Count of Reviewed Students**

| | | | | |
|---|---|---|---|---|
| **Free to Reduced** | | Free | **Error rates per type** | **Free to Reduced** |
| **Free to Paid** | | 0 | | **Free to Paid** |
| **Reduced to Paid** | | Reduced | | **Reduced to Paid** |
| **Reduced to Free** | | 0 | | **Reduced to Free** |

| 6A: Adjust for Consolidation Errors (Deductions): | | | 6B: Adjust for Consolidation Errors | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
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| | 3% Threshold Calculation | |
|---|---|---|
| 0.000% | **Benefit Issuance Changes** | 0 |
| 0.000% | **CBI Error Percentage** | 0.00% |
| 0.000% | **3% Threshold Met or Exceeded** | NO |
| 0.000% | **Assess Fiscal Action** | YES |

| s (Additions): | 7: Number of Meals Claimed Adjusted for Consolidation Errors: | | | 8: Select Month Being Recalculated: |
|---|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
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| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
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| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| 0 | 0 | 0 | 0 | |

| 3: TOTAL FISCAL ACTION FOR NSLP STANDARD: |
|---|
| $0.00 |

| 9: Normalization Factor: | | | 10: Operating Days in Month being Recalculated: | 11: Normalized & Re |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | | FREE |
| 0.99839832 | 1.01344958 | 1.04112113 | | 0 |
| 1.00441378 | 1.00802785 | 0.99510091 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |

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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| | | | 0 | 0 |

| calculated Meal Counts at the Reviewed Site: | | 12: Total Non-Reimbursable Meals: | 13: Total Number of Reimbursable Meals: | 14: Normalized & Re |
|---|---|---|---|---|
| REDUCED PRICE | PAID | | | FREE |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |

| | | | | |
|---|---|---|---|---|
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |

| ecalculated Reimbursable Meal Counts at the Reviewed Site: | | | 15: Reimbursement Rates for Each | |
|---|---|---|---|---|
| REDUCED PRICE | PAID | TOTAL | FREE | REDUCED PRICE |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

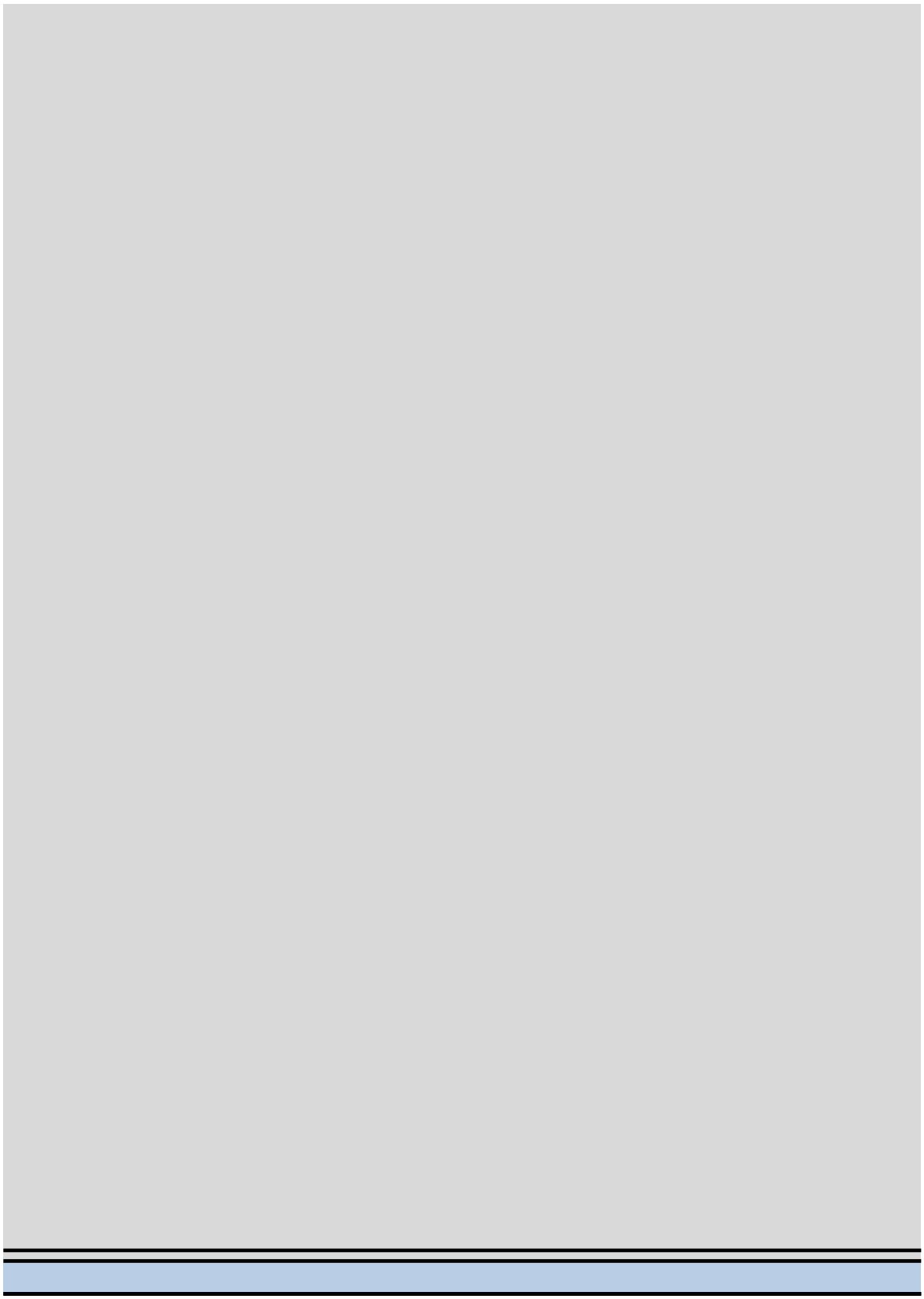
| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

| Benefit Type: | 16: Reimbursement Amounts Claimed by SFA: | | |
|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |

| | | | |
|---|---|---|---|
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |

17: SFA-wide Reimbursable Meals by Benefit Type Adjusted by Error Rate per Applicati

| | TOTAL FREE | TOTAL REDUCED | TOTAL PAID |
|---|---|---|---|
| Section 14 Total | 0 | 0 | 0 |
| Free to Reduced | 0.00 | 0.00 | |
| Free to Paid | 0.00 | | 0.00 |
| Reduced to Paid | | 0.00 | 0.00 |
| Reduced to Free | 0.00 | 0.00 | |
| Total Adjusted Meal Count | 0.00 | 0.00 | 0.00 |
| Rounded Total | 0 | 0 | 0 |
| Difference | 0 | 0 | 0 |



| ion Category | 18A: Adjustment to Meals per Site by Category (CB&I) | | | 18B: Allowab |
|---|---|---|---|---|
| TOTAL | Change in Free Meals | Change in RP Meals | Change in Paid Meals | Free |
| 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| 0.00 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
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| | 0 | 0 | 0 | 0 |
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| | 0 | 0 | 0 | 0 |

| ble Total Meals after Fiscal Action | | 18C: Allowable Total Reimbursement after Fiscal Action | | | |
|---|---|---|---|---|---|
| Reduced | Paid | Free | Reduced | Paid | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | # |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |
| 0 | 0 | $0.00 | $0.00 | $0.00 | |

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| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |

| 19: Total FFVP Reclaim (use negative number): | 20A: Number of After School Snacks Adjustments (Disallowed = negative # or Added = positive #) for Each Benefit Type: | | | 20B: Reimburseme |
|---|---|---|---|---|
| | FREE | REDUCED PRICE | PAID | FREE |
| | | | | $0.00 |
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| | | | | $0.00 |
| $0.00 | 0 | 0 | 0 | |

| nt Rates for Each Benefit Type of After School Snack: | | 20C: Total After School Snack Adjustment: | 21: TOTAL FISCAL AC |
|---|---|---|---|
| REDUCED PRICE | PAID | | |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
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| $0.00 | $0.00 | $0.00 | **$0.00** |
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| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | $0.00 | **$0.00** |
| | | $0.00 | **$0.00** |

| Review Information: | | | |
|---|---|---|---|
| **Month Being Reviewed:** | **0** | **Period:** | |
| **SFA Name:** | **0** | | |

| No. | Name of Site | 4: Number of Meals Claimed by SFA at th Requiring Recalculation: | |
|---|---|---|---|
| | | FREE | REDUCED PRICE |
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## Fiscal Action Formula for Breakfast (SBP) - Standard *C

### For Non-Provision Schools and Base-Year

| 1. Establish SFA Count of Reviewed Students | | |
|---|---|---|
| | FREE | REDUCED PRICE |
| **SFA Count of Students Eligible for Free and Reduced-Price Meals:** | 0 | 0 |

| ne Reviewed Site : | 5: Number of Meals Claimed by SFA at the Reviewed Site for the 30-Consecutive-Operating-Day Recalculation Period: | | | |
|---|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID | TOTAL |
| | | | | 0 |
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**ONLY USED FOR FULL RECALCULATION***

**Provision 2 & 3 Schools**

**2. Establish SA Count of Reviewed Students**

| | | # | | | |
|---|---|---|---|---|---|
| **Free to Reduced** | 0 | | Free | **Error rates per type** | **Free to Reduced** |
| **Free to Paid** | 0 | | 0 | | **Free to Paid** |
| **Reduced to Paid** | 0 | | Reduced | | **Reduced to Paid** |
| **Reduced to Free** | 0 | | 0 | | **Reduced to Free** |

| 6A: Adjust for Consolidation Errors (Deductions): | | | 6B: Adjust for Consolidation Errors | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
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| | 3% Threshold Calculation | |
|---|---|---|
| 0.000% | **Benefit Issuance Changes** | 0 |
| 0.000% | **CBI Error Percentage** | 0.00% |
| 0.000% | **3% Threshold Met or Exceeded** | NO |
| 0.000% | **Assess Fiscal Action** | YES |

| s (Additions): | 7: Number of Meals Claimed Adjusted for Consolidation Errors: | | | 8: Select Month Being Recalculated: |
|---|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
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| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| 0 | 0 | 0 | 0 | |

| 3: TOTAL FISCAL ACTION FOR NSLP STANDARD: |
|---|
| $0.00 |

| 9: Normalization Factor: | | | 10: Operating Days in Month being Recalculated: | 11: Normalized & Re |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | | FREE |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |

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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| | | | 0 | 0 |

| ecalculated Meal Counts at the Reviewed Site: | | 12: Total Non-Reimbursable Meals: | 13: Total Number of Reimbursable Meals: | 14: Normalized & Re |
|---|---|---|---|---|
| REDUCED PRICE | PAID | | | FREE |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
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|---|---|---|---|---|
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |

| ecalculated Reimbursable Meal Counts at the Reviewed Site: | | | 15: Reimbursement Rates for Each | |
|---|---|---|---|---|
| REDUCED PRICE | PAID | TOTAL | FREE | REDUCED PRICE |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

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|---|---|---|---|---|
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

| Benefit Type: | 16: Reimbursement Amounts Claimed by SFA: | | |
|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
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| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |

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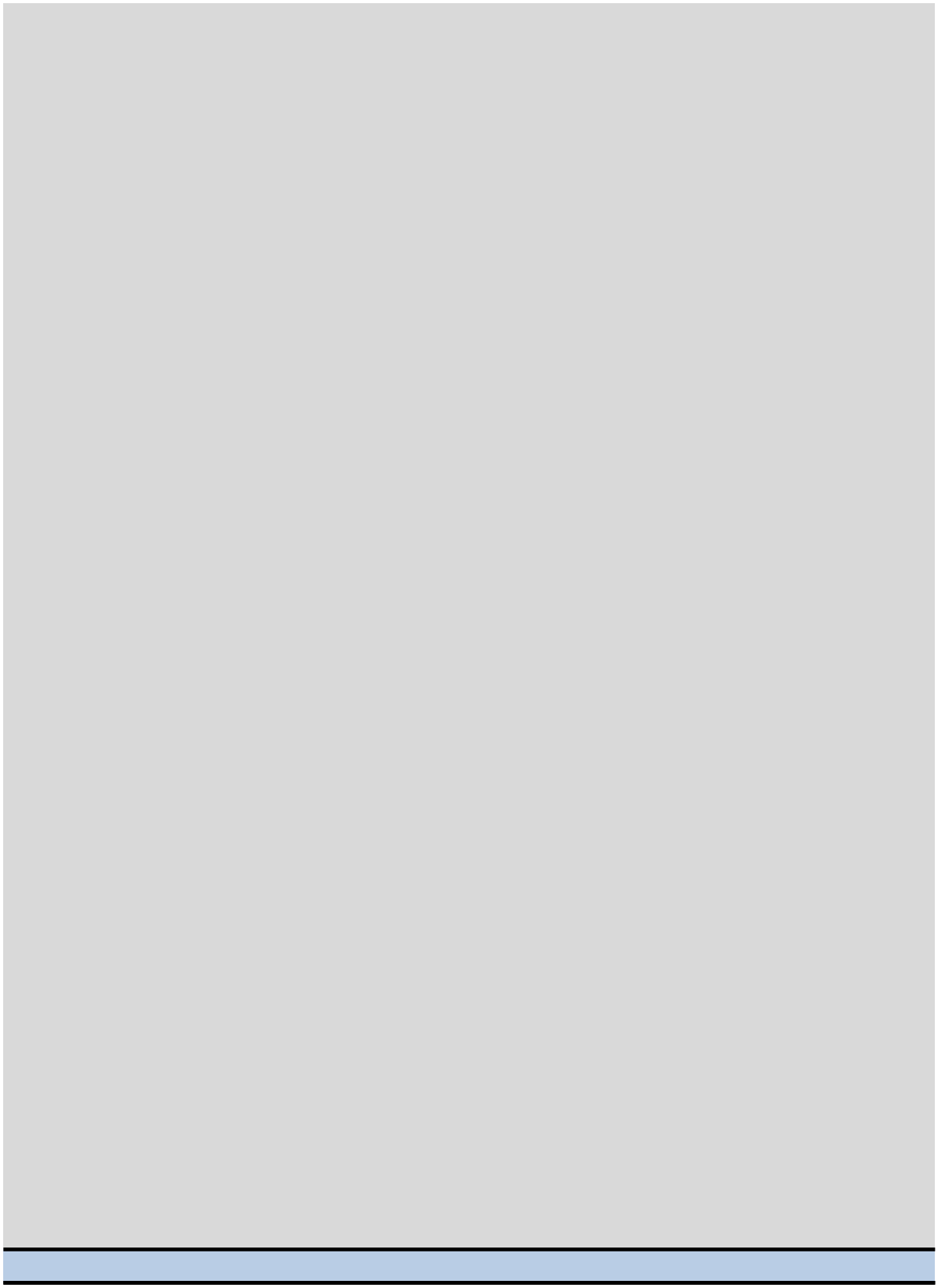
|---|---|---|---|
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |

17: SFA-wide Reimbursable Meals by Benefit Type Adjusted by Error Rate per Applicatior

| | TOTAL FREE | TOTAL REDUCED | TOTAL PAID |
|---|---|---|---|
| Section 14 Total | 0 | 0 | 0 |
| Free to Reduced | 0.00 | 0.00 | |
| Free to Paid | 0.00 | | 0.00 |
| Reduced to Paid | | 0.00 | 0.00 |
| Reduced to Free | 0.00 | 0.00 | |
| Total Adjusted Meal Count | 0.00 | 0.00 | 0.00 |
| Rounded Total | 0 | 0 | 0 |
| Difference | 0 | 0 | 0 |



| n Category | 18A: Adjustment to Meals per Site by Category | | | 18B: Allowabl |
|---|---|---|---|---|
| TOTAL | Change in Free Meals | Change in RP Meals | Change in Paid Meals | Free |
| 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| 0.00 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
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| | 0 | 0 | 0 | 0 |
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|---|---|---|---|---|
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |

| le Total Meals after Fiscal Action | | 18C: Allowable Total Reimbursement after Fiscal Action | | |
|---|---|---|---|---|
| Reduced | Paid | Free | Reduced | Paid |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
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| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |

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|---|---|---|---|---|
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
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| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
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| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
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| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
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| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |

| 19. Total Fiscal Action for Site |
| --- |
| $0.00 |
| $0.00 |
| $0.00 |
| $0.00 |
| $0.00 |
| $0.00 |
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| $0.00 |
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| $0.00 |

| Review Information: | | | |
|---|---|---|---|
| **Month Being Reviewed:** | | **Period:** | |
| **SFA Name:** | | | |

| No. | Name of Site | 4: Number of Meals Claimed by SFA at t Requiring Recalculation | |
|---|---|---|---|
| | | FREE | REDUCED PRICE |
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# Fiscal Action Formula for Seamless Summer Option (SSO) Lunch (NSL

## For Non-Provision Schools and Base-Year

### 1. Establish SFA Count of Reviewed Students

| SFA Count of Students Eligible for Free and Reduced-Price Meals: | FREE | REDUCED PRICE |
|---|---|---|
| | | |

| the Reviewed Site n: | 5: Number of Meals Claimed by SFA at the Reviewed Site for the 30-Consecutive-Operating-Day Recalculation Period: | | | |
|---|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID | TOTAL |
| | | | | 0 |
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## P) - Standard *ONLY USED FOR FULL RECALCULATION*

**Provision 2 & 3 Schools**

**2. Establish SA Count of Reviewed Students**

| | | | | | |
|---|---|---|---|---|---|
| **Free to Reduced** | | # | Free | **Error rates per type** | **Free to Reduced** |
| **Free to Paid** | | | 0 | | **Free to Paid** |
| **Reduced to Paid** | | | Reduced | | **Reduced to Paid** |
| **Reduced to Free** | | | 0 | | **Reduced to Free** |

| 6A: Adjust for Consolidation Errors (Deductions): | | | 6B: Adjust for Consolidation Errors | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
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| | 3% Threshold Calculation | |
|---|---|---|
| 0.000% | **Benefit Issuance Changes** | 0 |
| 0.000% | **CBI Error Percentage** | 0.00% |
| 0.000% | **3% Threshold Met or Exceeded** | NO |
| 0.000% | **Assess Fiscal Action** | YES |

| s (Additions): | 7: Number of Meals Claimed Adjusted for Consolidation Errors: | | | 8: Select Month Being Recalculated: |
|---|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
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| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| 0 | 0 | 0 | 0 | |

| 3: TOTAL FISCAL ACTION FOR NSLP STANDARD: |
|---|
| $0.00 |

| 9: Normalization Factor: | | | 10: Operating Days in Month being Recalculated: | 11: Normalized & Re |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | | FREE |
| 0.99839832 | 1.01344958 | 1.04112113 | | 0 |
| 1.00441378 | 1.00802785 | 0.99510091 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |

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|---|---|---|---|---|
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
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| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| | | | 0 | 0 |

| calculated Meal Counts at the Reviewed Site: | | 12: Total Non-Reimbursable Meals: | 13: Total Number of Reimbursable Meals: | 14: Normalized & Re |
|---|---|---|---|---|
| REDUCED PRICE | PAID | | | FREE |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |

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|---|---|---|---|---|
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |

| ecalculated Reimbursable Meal Counts at the Reviewed Site: | | | 15: Reimbursement Rates for Each | |
|---|---|---|---|---|
| REDUCED PRICE | PAID | TOTAL | FREE | REDUCED PRICE |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

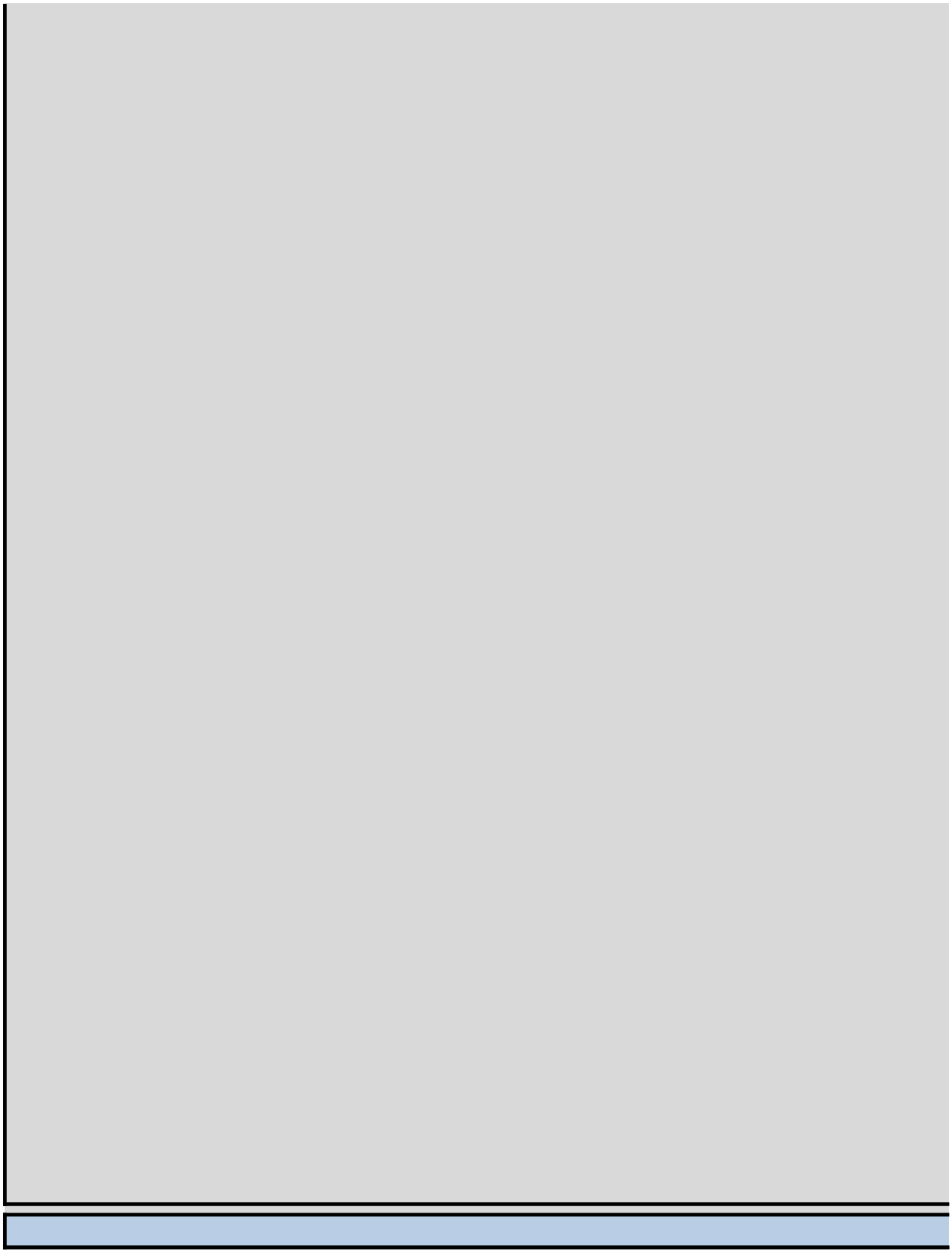
| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

| Benefit Type: | 16: Reimbursement Amounts Claimed by SFA: | | |
|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |

| | | | |
|---|---|---|---|
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |

17: SFA-wide Reimbursable Meals by Benefit Type Adjusted by Error Rate per Application C

| | TOTAL FREE | TOTAL REDUCED | TOTAL PAID |
|---|---|---|---|
| Section 14 Total | 0 | 0 | 0 |
| Free to Reduced | 0.00 | 0.00 | |
| Free to Paid | 0.00 | | 0.00 |
| Reduced to Paid | | 0.00 | 0.00 |
| Reduced to Free | 0.00 | 0.00 | |
| Total Adjusted Meal Count | 0.00 | 0.00 | 0.00 |
| Rounded Total | 0 | 0 | 0 |
| Difference | 0 | 0 | 0 |



| ategory | 18A: Adjustment to Meals per Site by Category (CB&I) | | | 18B: Allowab |
|---|---|---|---|---|
| TOTAL | Change in Free Meals | Change in RP Meals | Change in Paid Meals | Free |
| 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| 0.00 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
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|---|---|---|---|---|
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |

| ble Total Meals after Fiscal Action | | 18C: Allowable Total Reimbursement after Fiscal Action | | |
|---|---|---|---|---|
| Reduced | Paid | Free | Reduced | Paid |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |

| | | | | |
|---|---|---|---|---|
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
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| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |

| 19A: Number of After School Snacks Adjustments (Disallowed = negative # or Added = positive #) for Each Benefit Type: | | | 19B: Reimbursement Rates for Each Ben | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
| | | | $0.00 | $0.00 |
| | | | $0.00 | $0.00 |
| | | | $0.00 | $0.00 |
| | | | $0.00 | $0.00 |
| | | | $0.00 | $0.00 |
| | | | $0.00 | $0.00 |
| | | | $0.00 | $0.00 |
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| | | | $0.00 | $0.00 |
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| | | | $0.00 | $0.00 |
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| | | | $0.00 | $0.00 |
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| | | | $0.00 | $0.00 |
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| | | | $0.00 | $0.00 |
| | | | $0.00 | $0.00 |
| | | | $0.00 | $0.00 |
| | | | $0.00 | $0.00 |
| | | | $0.00 | $0.00 |
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| | | | $0.00 | $0.00 |
| 0 | 0 | 0 | | |

| efit Type of Snacks: | 19C: Total Snack Adjustment: | 20: TOTAL FISCAL AC |
|---|---|---|
| PAID | | |
| $0.00 | $0.00 | **$0.00** |
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| $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | **$0.00** |
| | $0.00 | **$0.00** |

| Review Information: | | | |
|---|---|---|---|
| **Month Being Reviewed:** | **0** | **Period:** | |
| **SFA Name:** | **0** | | |

| No. | Name of Site | 4: Number of Meals Claimed by SFA at t Requiring Recalculation | |
|---|---|---|---|
| | | FREE | REDUCED PRICE |
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## Fiscal Action Formula for Seamless Summer option (SSO) Breakfast (

### For Non-Provision Schools and Base-Ye

| 1. Establish SFA Count of Reviewed Students | | |
|---|---|---|
| | FREE | REDUCED PRICE |
| **SFA Count of Students Eligible for Free and Reduced-Price Meals:** | 0 | 0 |

| the Reviewed Site n: | 5: Number of Meals Claimed by SFA at the Reviewed Site for the 30-Consecutive-Operating-Day Recalculation Period: | | | |
|---|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID | TOTAL |
| | | | | 0 |
| | | | | 0 |
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## SBP) - Standard *ONLY USED FOR FULL RECALCULATION*

**ear Provision 2 & 3 Schools**

**2. Establish SA Count of Reviewed Students**

| | | | | | |
|---|---|---|---|---|---|
| **Free to Reduced** | 0 | # | Free | **Error rates per type** | **Free to Reduced** |
| **Free to Paid** | 0 | | 0 | | **Free to Paid** |
| **Reduced to Paid** | 0 | | Reduced | | **Reduced to Paid** |
| **Reduced to Free** | 0 | | 0 | | **Reduced to Free** |

| 6A: Adjust for Consolidation Errors (Deductions): | | | 6B: Adjust for Consolidation Errors ( | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
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| | 3% Threshold Calculation | |
|---|---|---|
| 0.000% | **Benefit Issuance Changes** | 0 |
| 0.000% | **CBI Error Percentage** | 0.00% |
| 0.000% | **3% Threshold Met or Exceeded** | NO |
| 0.000% | **Assess Fiscal Action** | YES |

| Additions): | 7: Number of Meals Claimed Adjusted for Consolidation Errors: | | | 8: Select Month Being Recalculated: |
|---|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
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| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| | 0 | 0 | 0 | |
| 0 | 0 | 0 | 0 | |

| 3: TOTAL FISCAL ACTION FOR NSLP STANDARD: |
|---|
| $0.00 |

| 9: Normalization Factor: | | | 10: Operating Days in Month being Recalculated: | 11: Normalized & Re |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | | FREE |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |

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|---|---|---|---|---|
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| 0.99052544 | 1.01007311 | 1.00979385 | | 0 |
| | | | 0 | 0 |

| calculated Meal Counts at the Reviewed Site: | | 12: Total Non-Reimbursable Meals: | 13: Total Number of Reibursable Meals: | 14: Normalized & Re |
|---|---|---|---|---|
| REDUCED PRICE | PAID | | | FREE |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |

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|---|---|---|---|---|
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |
| 0 | 0 | | 0 | 0 |

| ecalculated Reimbursable Meal Counts at the Reviewed Site: | | | 15: Reimbursement Rates for Each | |
|---|---|---|---|---|
| REDUCED PRICE | PAID | TOTAL | FREE | REDUCED PRICE |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

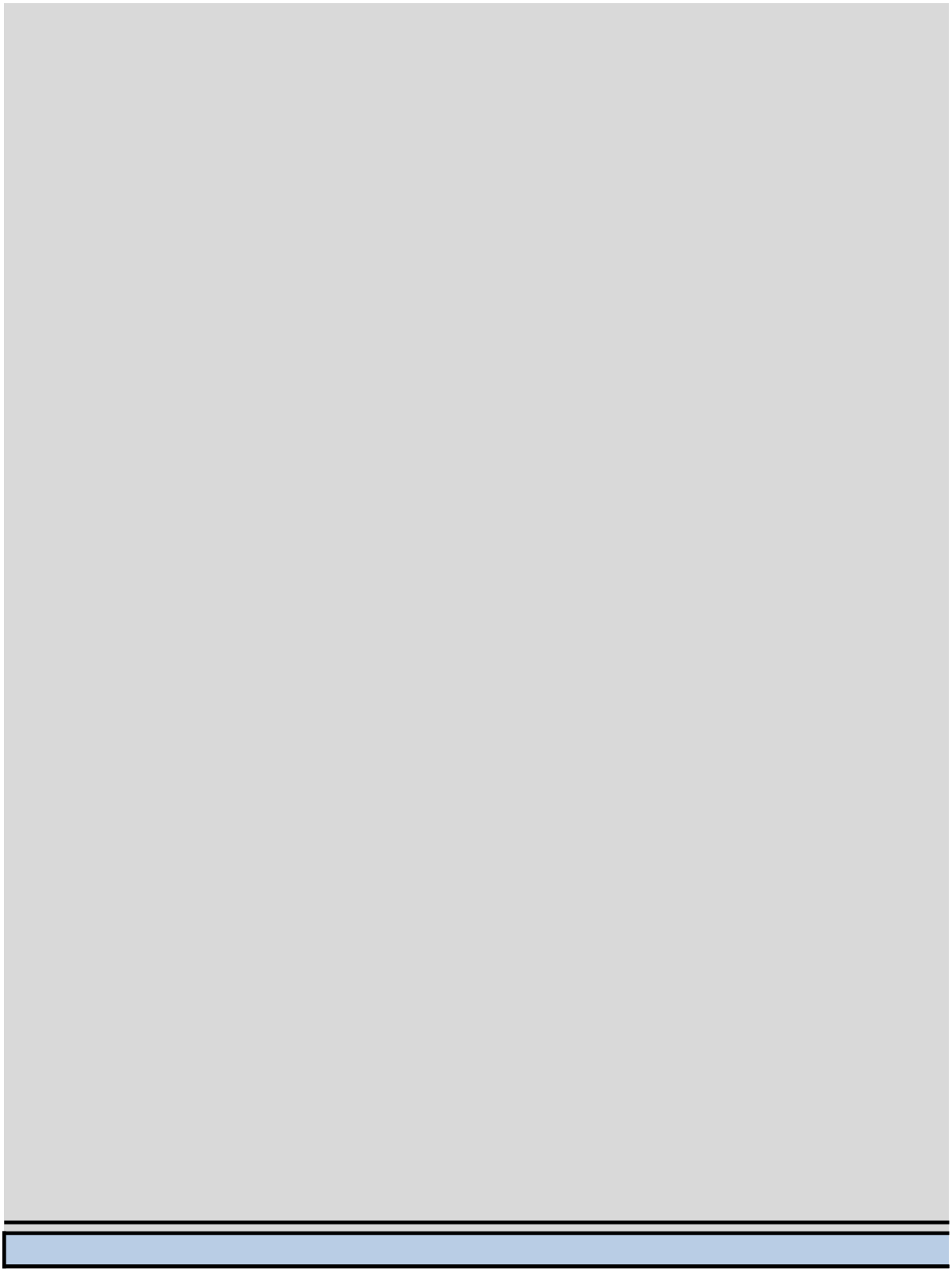
| | | | | |
|---|---|---|---|---|
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |

| Benefit Type: | 16: Reimbursement Amounts Claimed by SFA: | | |
|---|---|---|---|
| PAID | FREE | REDUCED PRICE | PAID |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |

| | | | |
|---|---|---|---|
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 |

17: SFA-wide Reimbursable Meals by Benefit Type Adjusted by Error Rate per Application C

| | TOTAL FREE | TOTAL REDUCED | TOTAL PAID |
|---|---|---|---|
| Section 14 Total | 0 | 0 | 0 |
| Free to Reduced | 0.00 | 0.00 | |
| Free to Paid | 0.00 | | 0.00 |
| Reduced to Paid | | 0.00 | 0.00 |
| Reduced to Free | 0.00 | 0.00 | |
| Total Adjusted Meal Count | 0.00 | 0.00 | 0.00 |
| Rounded Total | 0 | 0 | 0 |
| Difference | 0 | 0 | 0 |



| Category | 18A: Adjustment to Meals per Site by Category | | | 18B: Allowa |
|---|---|---|---|---|
| TOTAL | Change in Free Meals | Change in RP Meals | Change in Paid Meals | Free |
| 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| 0.00 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
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| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |

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|---|---|---|---|---|
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |
| | 0 | 0 | 0 | 0 |

| ıble Total Meals after Fiscal Action | | 18C: Allowable Total Reimbursement after Fiscal Action | | |
|---|---|---|---|---|
| Reduced | Paid | Free | Reduced | Paid |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |

| | | | | |
|---|---|---|---|---|
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
| 0 | 0 | $0.00 | $0.00 | $0.00 |
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# Fiscal Action Formula for Lunch (NSLP) - Provision 2

## For Non-Base-Year Provision 2 & Community Eligibility Provisio

**Review Information:**

| | | |
|---|---|---|
| **Month Being Reviewed:** | | **Period:** |
| **SFA Name:** | | **All** |

| No. | Name of Site | 2: Total Number of Meals Claimed by the Site: | 3: Adjust for Cons |
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| | | | Deductions |
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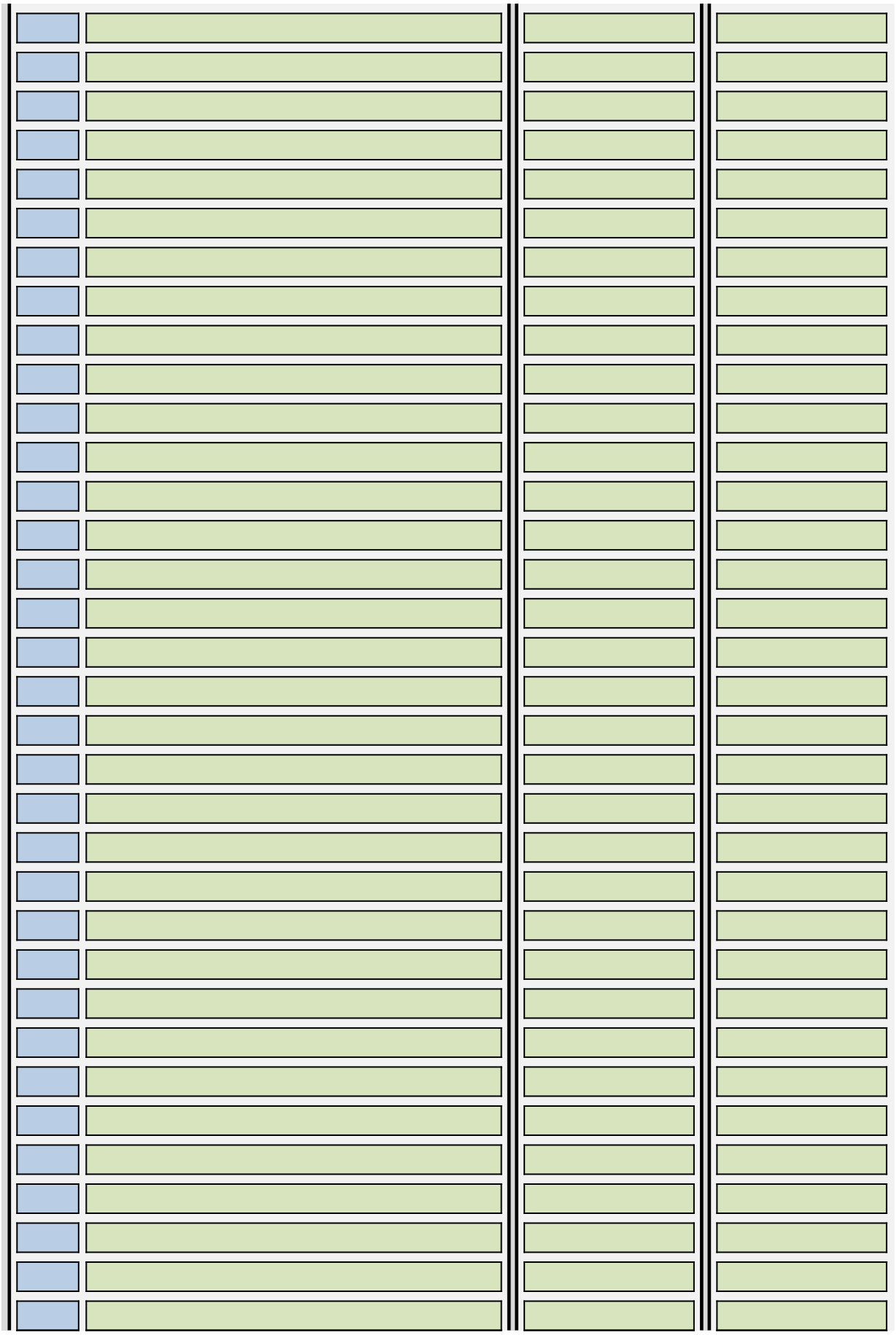

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| | Totals | 0 | 0≠ |

**& CEP**
**n Schools**

| 1: TOTAL FISCAL ACTION FOR NSLP Provision 2 & CEP: |
|---|
| **$0.00** |

| olidation Errors: | 4: Meals Adjusted for Consolidation Errors: | 5: Total Non-Reimbursable Meals: | 6A: SFA Claiming Percentages: NOTE: If CEP is accounted for and leave % Reduced Price fi | |
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| Additions | | | % Free | % Reduced Price |
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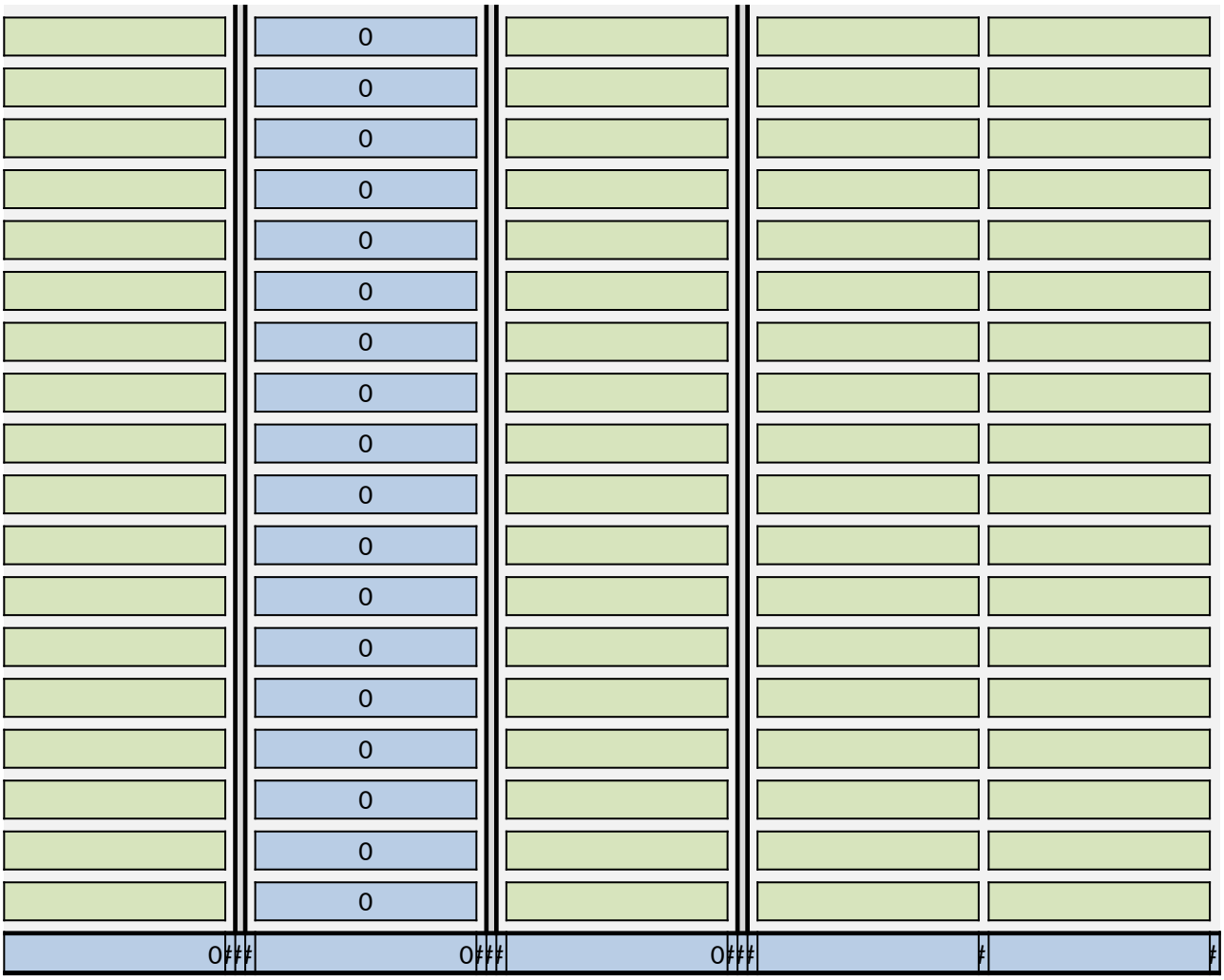
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| s used ensure 1.6 multiplier is ield blank | 6B: SA Claiming Percentages: NOTE: If CEP is used ensure 1.6 multiplier is accounted for and leave % Reduced Price field blank | | | 7: Maximu |
|---|---|---|---|---|
| % Paid | % Free | % Reduced Price | % Paid | Free |
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| m Number of Reimbursable Meals by Benefit Type: | | | 8: Reimbursement Rates for Each I | |
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| Reduced Price | Paid | Total | Free | Reduced Price |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
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| 0 | 0 | 0 | | |

| Benefit Type: | 9: Reimbursement Amounts Claimed by SFA: | | | 10: Maximum All |
|---|---|---|---|---|
| Paid | Free | Reduced price | Paid | Free |
| $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
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| owable Reimbursement Based on SA Assessment: | | 11: Amount of NSLP Fiscal Action: | 12: Total FFVP Reclaim (negative number): | 13A: Number of After = negative # or Add |
|---|---|---|---|---|
| Reduced Price | Paid | | | FREE |
| $0.00 | $0.00 | $0.00 | | |
| $0.00 | $0.00 | $0.00 | | |
| $0.00 | $0.00 | $0.00 | | |
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| r School Snacks Adjustments (Disallowed ded = positive #) for Each Benefit Type: | | 13B: Reimbursement Rates for Each Benefit Type of After School Snack: | | |
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| REDUCED PRICE | PAID | FREE | REDUCED PRICE | PAID |
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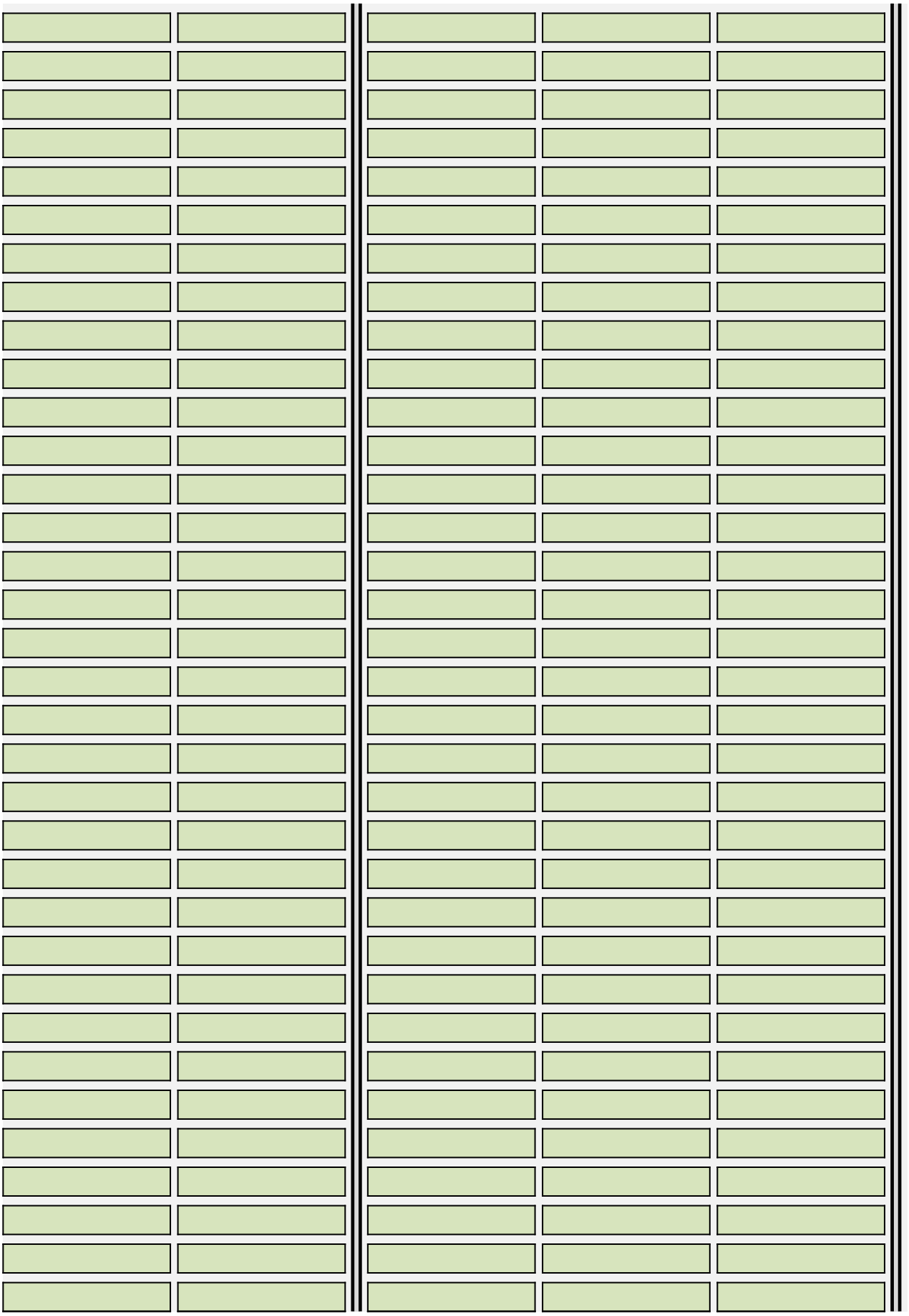

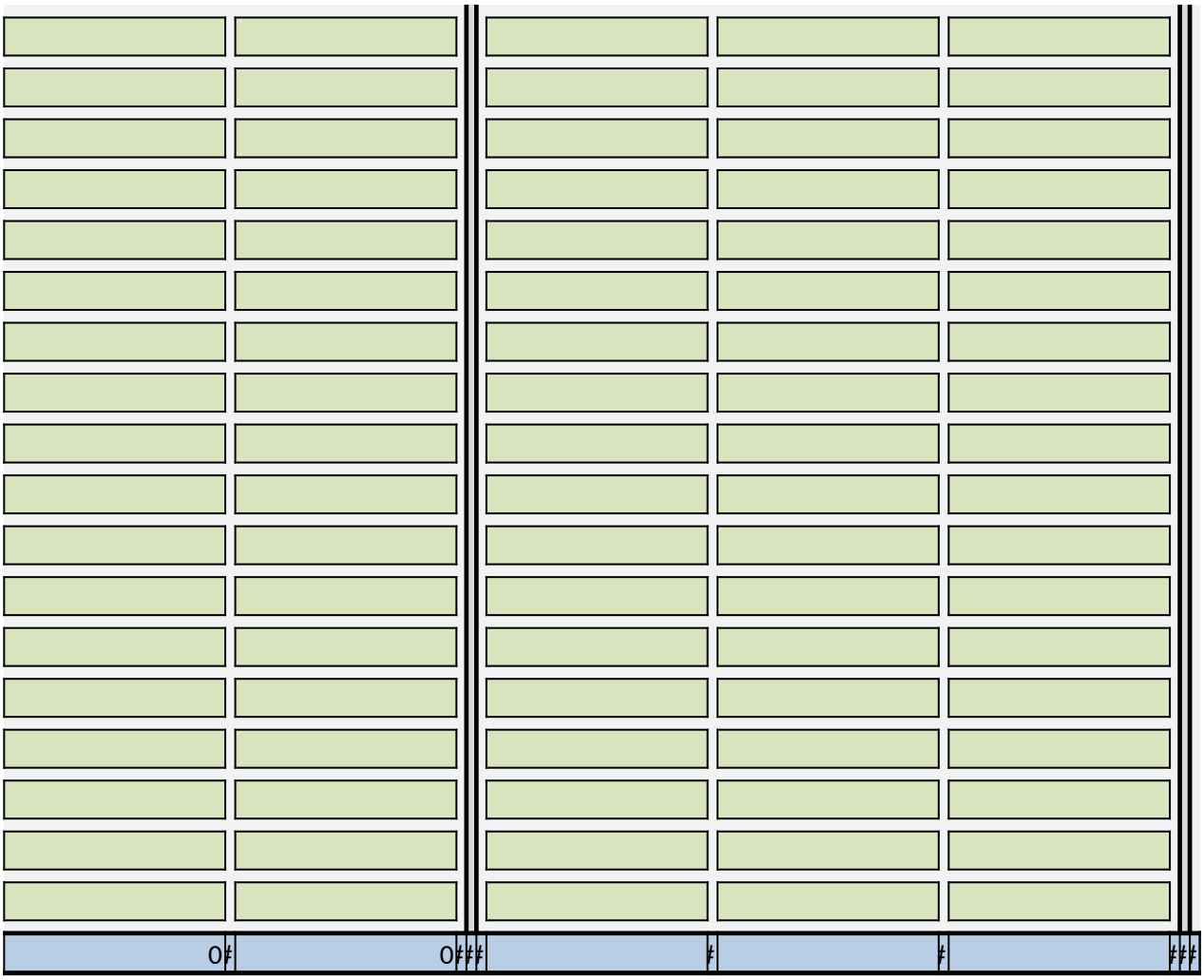
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| 13C: Total After School Snack Adjustment: | 14: TOTAL FISCAL AC |
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# Fiscal Action Formula for Breakfast (SBP) - Provision 2

## For Non-Base-Year Provision 2 & Community Eligibility Provisio

**Review Information:**

| | | |
|---|---|---|
| **Month Being Reviewed:** | | **Period:** |
| **SFA Name:** | | **All** |

| No. | Name of Site | 2: Total Number of Meals Claimed by the Site: | 3: Adjust for Cons |
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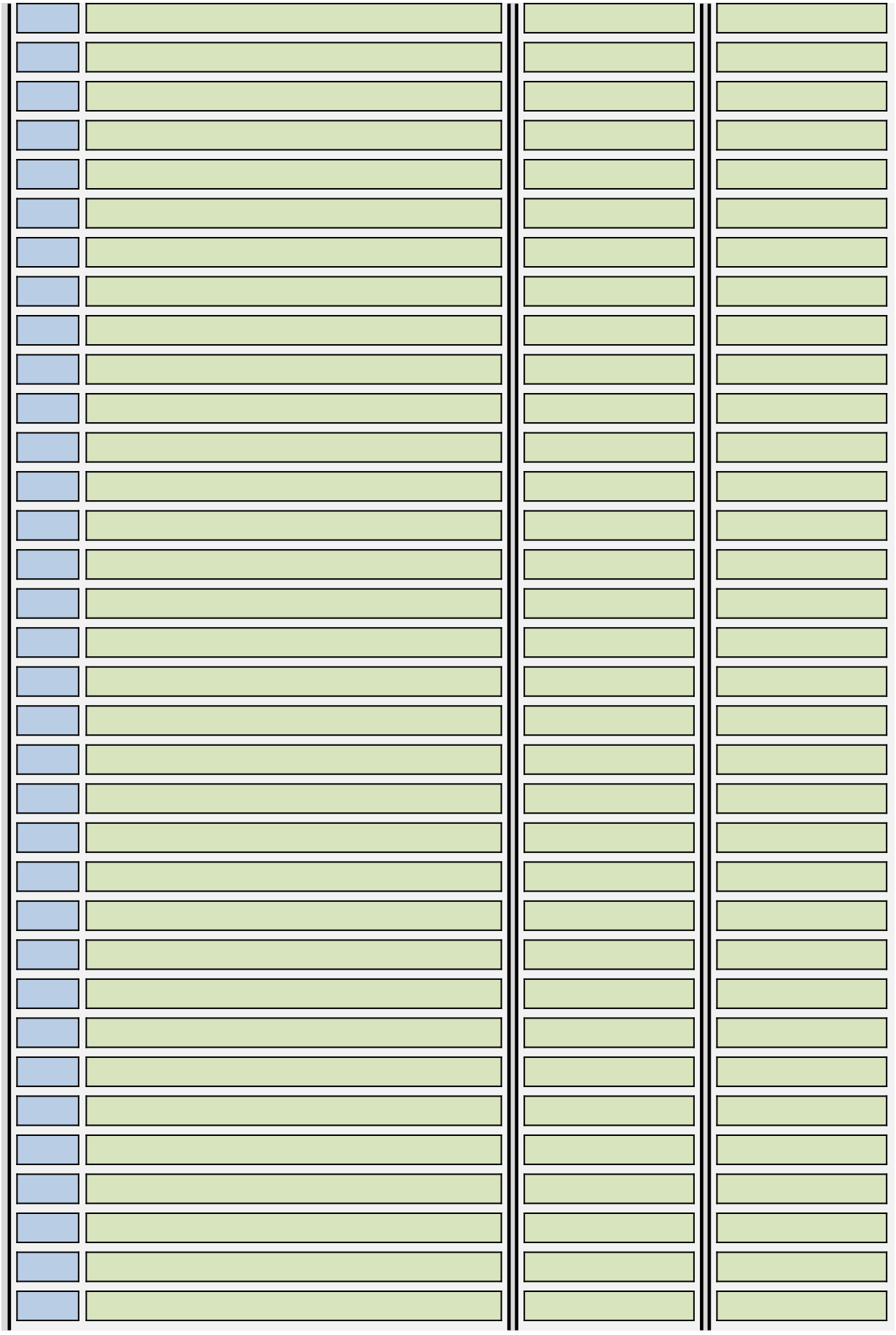

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| | Totals | 0 | 0≠ |

**2 & CEP**
**n Schools**

| 1: TOTAL FISCAL ACTION FOR SBP Provision 2 & CEP: |
|---|
| $0.00 |

| olidation Errors: | 4: Meals Adjusted for Consolidation Errors: | 5: Total Non-Reimbursable Meals: | 6A: SFA Claiming Percentages: NOTE: If CEP is accounted for and leave % Reduced Price fi | |
|---|---|---|---|---|
| Additions | | | % Free | % Reduced Price |
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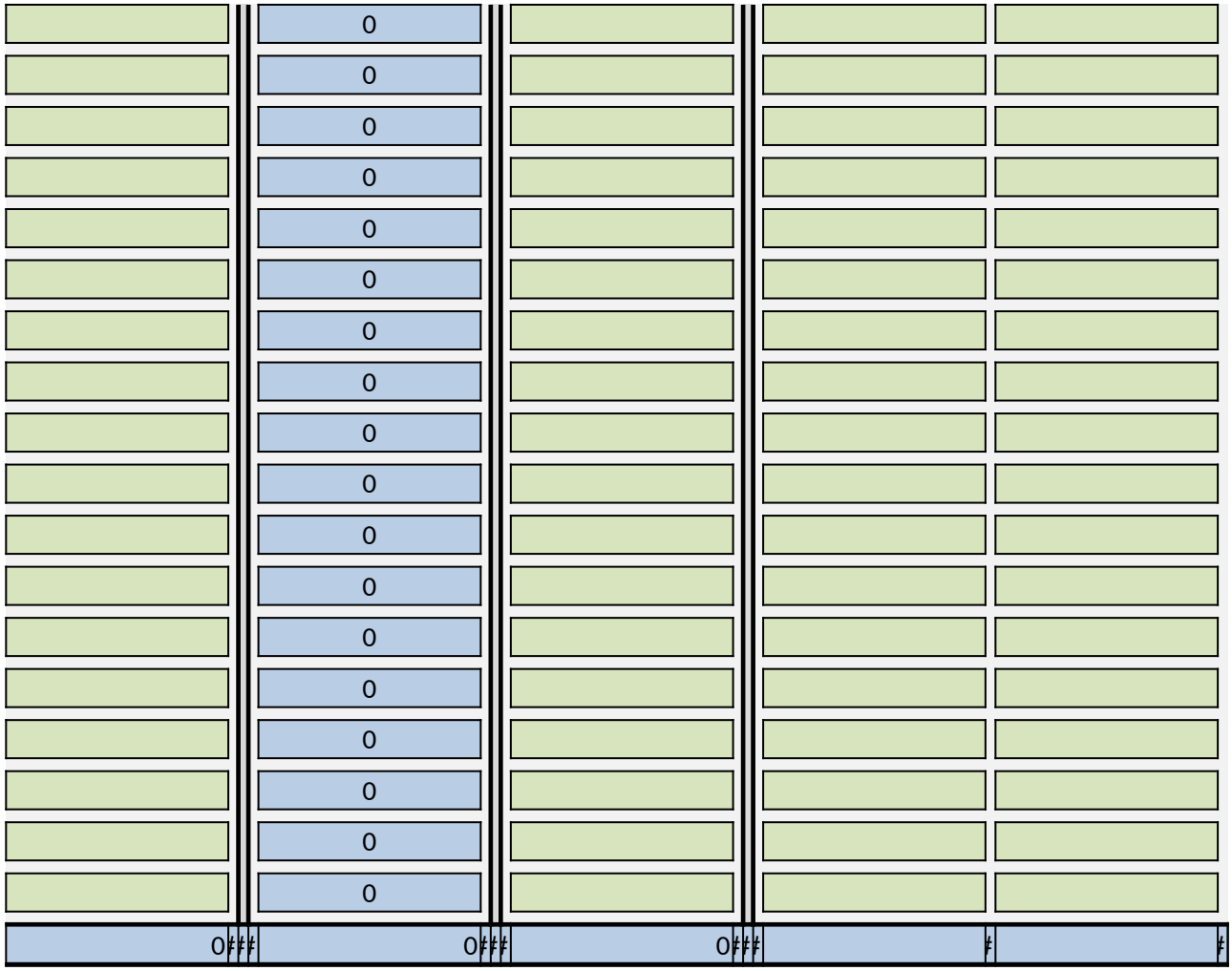
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| s used ensure 1.6 multiplier is ield blank | 6B: SA Claiming Percentages: NOTE: If CEP is used ensure 1.6 multiplier is accounted for and leave % Reduced Price field blank | | | 7: Maximu |
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| % Paid | % Free | % Reduced Price | % Paid | Free |
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| m Number of Reimbursable Meals by Benefit Type: | | | 8: Reimbursement Rates for Each I | |
|---|---|---|---|---|
| Reduced Price | Paid | Total | Free | Reduced Price |
| 0 | 0 | 0 | | |
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| Benefit Type: | 9: Reimbursement Amounts Claimed by SFA: | | | 10: Maximum All |
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| Paid | Free | Reduced price | Paid | Free |
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| owable Reimbursement Based on SA Assessment: | | 11: TOTAL FISCAL AC |
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| Reduced Price | Paid | |
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# Fiscal Action Formula for Lunch (NSLP) - Provision 2 & CEP *ONLY

## For Non-Base-Year Provision 2 & Community Eligibility

**Review Information:**

**Month Being Reviewed:**

**SFA Name:**

| No. | Name of Site | 2: Number of Meals Claimed Requiring RECALC: | 3: Meal Count for 30-Day Recalc. Period: |
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**USED FOR FULL RECALCULATION***
**Provision Schools**

| Period: | 1: TOTAL FISCAL ACTION FOR NSLP Provision 2 & CEP: |
|---|---|
| All | $0.00 |

| 4: Adjust for Consolidation Errors: | | 5: Meals Adjusted for Consolidation Errors: | 6: Select Month Being Recalculated: | 7: Normalization Factor |
|---|---|---|---|---|
| Deductions | Additions | | | |
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| 8: Operating Days in Month being Recalculated: | 9: Normalized and Recalculated Meal Count: | 10: Total Non-Reimbursable Meals: | 11A: SFA Claiming Percentages: NOTE: If CEP accounted for and leave % Reduced Price fi | |
|---|---|---|---|---|
| | | | % Free | % Reduced Price |
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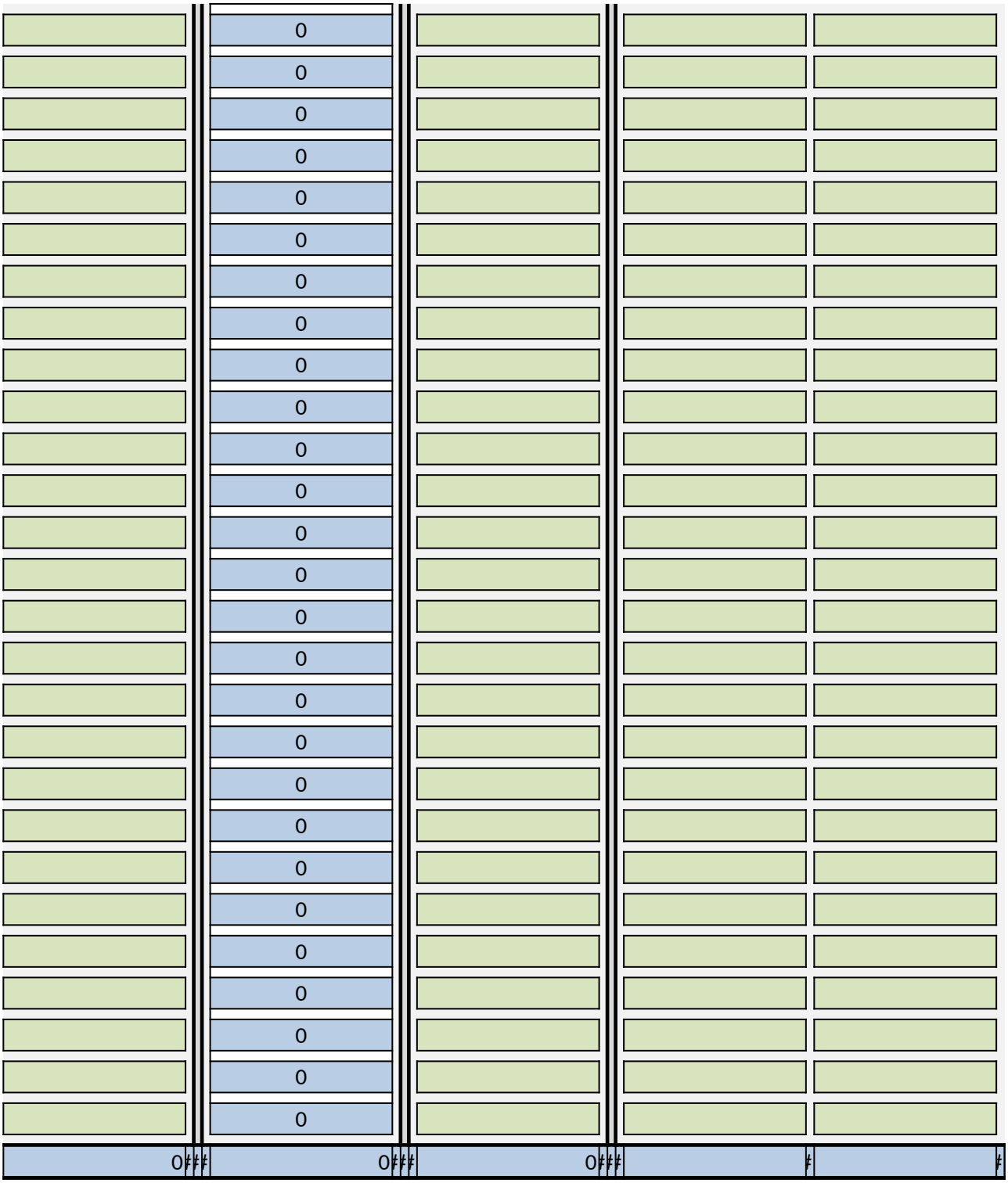
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| is used ensure 1.6 multiplier is ield blank | 11B: SA Claiming Percentages: NOTE: If CEP is used ensure 1.6 multiplier is accounted for and leave % Reduced Price field blank | | | 12: Maximu |
|---|---|---|---|---|
| % Paid | % Free | % Reduced Price | % Paid | Free |
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| ım Number of Reimbursable Meals by Benefit Type: | | | 13: Reimbursement Rates for Each | |
|---|---|---|---|---|
| Reduced Price | Paid | Total | Free | Reduced Price |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
| 0 | 0 | 0 | $0.00 | $0.00 |
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| Benefit Type: | 14: Reimbursement Amounts Claimed by SFA: | | | 15: Maximum All |
|---|---|---|---|---|
| Paid | Free | Reduced price | Paid | Free |
| $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
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| owable Reimbursement Based on SA Assessment: | | 16: Amount of NSLP Fiscal Action: | 17: Total FFVP Reclaim (use negative): | 18A: Number of After = negative # or Add |
|---|---|---|---|---|
| Reduced Price | Paid | | | FREE |
| $0.00 | $0.00 | $0.00 | $0.00 | |
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| $0.00 | $0.00 | $0.00 | $0.00 | |
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| $0.00 | $0.00 | $0.00 | $0.00 | |
| $0.00 | $0.00 | $0.00 | $0.00 | |
| $0.00 | $0.00 | $0.00 | $0.00 | |

| r School Snacks Adjustments (Disallowed ded = positive #) for Each Benefit Type: | | 18B: Reimbursement Rates for Each Benefit Type of After School Snack: | | |
|---|---|---|---|---|
| REDUCED PRICE | PAID | FREE | REDUCED PRICE | PAID |
| | | | | |
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| 18C: Total After School Snack Adjustment: | 19: TOTAL FISCAL AC |
|---|---|
| $0.00 | **$0.00** |
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| $0.00 | ## | **$0.00** |

# Fiscal Action Formula for Breakfast (SBP) - Provision 2 & CEP *ONL

## For Non-Base-Year Provision 2 & Community Eligibility

**Review Information:**

**Month Being Reviewed:**

**SFA Name:**

| No. | Name of Site | 2: Number of Meals Claimed Requiring RECALC: | 3: Meal Count for 30-Day Recalculation Period: |
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**Y USED FOR FULL RECALCULATION***

**Provision Schools**

| Period: | 1: TOTAL FISCAL ACTION FOR SBP Provision 2 & CEP: |
|---|---|
| All | $0.00 |

| 4: Adjust for Consolidation Errors: | | 5: Meals Adjusted for Consolidation Errors: | 6: Select Month Being Recalculated: | 7: Normalization Factor |
|---|---|---|---|---|
| Deductions | Additions | | | |
| | | 0 | | 0.999430930 |
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| 0≠ | 0### | 0 | | |

| 8: Operating Days in Month being Recalculated: | 9: Normalized and Recalculated Meal Count: | 10: Total Non-Reimbursable Meals: | 11A: SFA Claiming Percentages: NOTE: If CEP accounted for and leave % Reduced Price fi | |
|---|---|---|---|---|
| | | | % Free | % Reduced Price |
| | 0 | | | |
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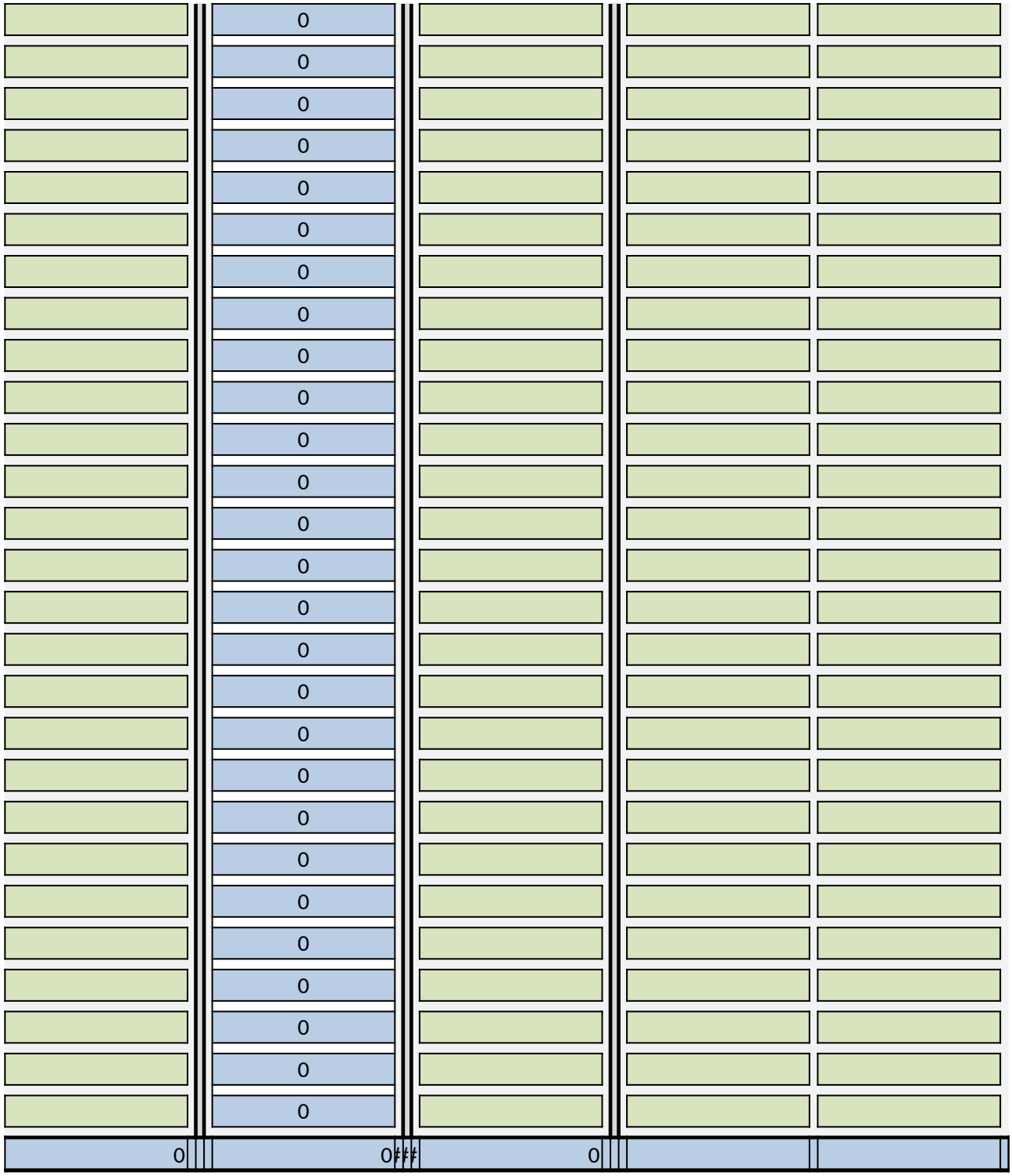
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| is used ensure 1.6 multiplier is ield blank | 11B: SA Claiming Percentages: NOTE: If CEP is used ensure 1.6 multiplier is accounted for and leave % Reduced Price field blank | | | 12: Maximu |
|---|---|---|---|---|
| % Paid | % Free | % Reduced Price | % Paid | Free |
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| ım Number of Reimbursable Meals by Benefit Type: | | | 13: Reimbursement Rates for Each | |
|---|---|---|---|---|
| Reduced Price | Paid | Total | Free | Reduced Price |
| 0 | 0 | 0 | | |
| 0 | 0 | 0 | | |
| 0 | 0 | 0 | | |
| 0 | 0 | 0 | | |
| 0 | 0 | 0 | | |
| 0 | 0 | 0 | | |
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| 0 | 0 | 0 | | |
| 0 | 0 | 0 | | |

| Benefit Type: | 14: Reimbursement Amounts Claimed by SFA: | | | 15: Maximum All |
|---|---|---|---|---|
| Paid | Free | Reduced price | Paid | Free |
| | $0.00 | $0.00 | $0.00 | $0.00 |
| | $0.00 | $0.00 | $0.00 | $0.00 |
| | $0.00 | $0.00 | $0.00 | $0.00 |
| | $0.00 | $0.00 | $0.00 | $0.00 |
| | $0.00 | $0.00 | $0.00 | $0.00 |
| | $0.00 | $0.00 | $0.00 | $0.00 |
| | $0.00 | $0.00 | $0.00 | $0.00 |
| | $0.00 | $0.00 | $0.00 | $0.00 |
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| | $0.00 | $0.00 | $0.00 | $0.00 |
| | $0.00 | $0.00 | $0.00 | $0.00 |

| owable Reimbursement Based on SA Assessment: | | 16: TOTAL FISCAL AC |
|---|---|---|
| Reduced Price | Paid | |
| $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | **$0.00** |
| $0.00 | $0.00 | **$0.00** |
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| $0.00 | $0.00 | **$0.00** |

# Fiscal Action Formula for Lunch (NSLP) - Provisio

## For Non-Base-Year Provision 3 Schools

**Review Information:**

**Month Being Reviewed:** | **Period:**

**SFA Name:** | **All**

| No. | Name of Site | 2: Funds (to be) Provided to Site for Month: | 3: Adjust for Inco Neces |
|---|---|---|---|
| | | | Deductions |
| | | $0.00 | $0.00 |
| | | $0.00 | $0.00 |
| | | $0.00 | $0.00 |
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| | | $0.00 | $0.00 |
| | | $0.00 | $0.00 |
| | Totals | $0.00 | $0.00 |

**n 3**

| 1: TOTAL FISCAL ACTION FOR NSLP Provision 3: |
|---|
| **$0.00** |

| rrect Payment if sary: | 4: Number of Meals Claimed by the Site: | | | 5: Total Non-Reimbursable Meals: |
|---|---|---|---|---|
| Additions | FREE | REDUCED PRICE | PAID | |
| $0.00 | | | | 0 |
| $0.00 | | | | 0 |
| $0.00 | | | | 0 |
| $0.00 | | | | 0 |
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| 6: Maximum Number of Reimbursable Meals by Benefit Type: | | | 7: Reimbursement Rates for Each I | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
| 0 | 0 | 0 | | |
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| Benefit Type: | 8: Reimbursment Claimed by Site: | 9: Maximum Allowable Reimbursement | 10: Amount of NSLP Fiscal Action: | 11: Total FFVP Reclaim (use negative number): | 1 |
|---|---|---|---|---|---|
| PAID | | | | | |
| | $0.00 | $0.00 | $0.00 | | |
| | $0.00 | $0.00 | $0.00 | | |
| | $0.00 | $0.00 | $0.00 | | |
| | $0.00 | $0.00 | $0.00 | | |
| | $0.00 | $0.00 | $0.00 | | |
| | $0.00 | $0.00 | $0.00 | | |
| | $0.00 | $0.00 | $0.00 | | |
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| | $0.00 | $0.00 | $0.00 | |
| | $0.00 | $0.00 | $0.00 | |
| | $0.00 | $0.00 | $0.00 | |

| 12A: Number of After School Snacks Adjustments (Disallowed = negative # or Added = positive #) for Each Benefit Type: | | | 12B: Reimbursement Rates for Each Ben School Snack: | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
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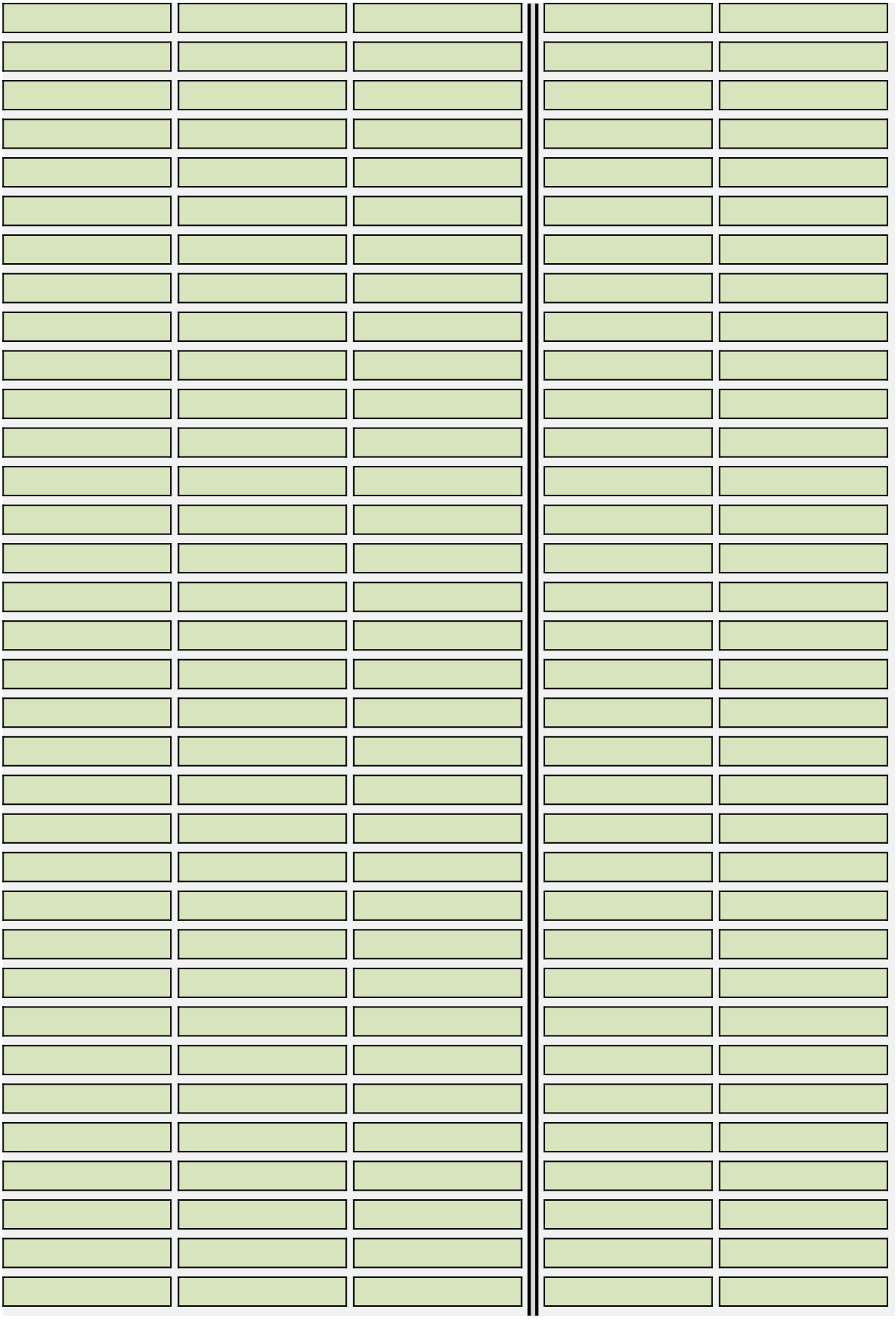

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| nefit Type of After | 12C: Total After School Snack Adjustment: | 13: TOTAL FISCAL AC |
|---|---|---|
| PAID | | |
| | $0.00 | **$0.00** |
| | $0.00 | **$0.00** |
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# Fiscal Action Formula for Breakfast (SBP) - Provisi

## For Non-Base-Year Provision 3 Schools

**Review Information:**

**Month Being Reviewed:** | **Period:**

**SFA Name:** | **All**

| No. | Name of Site | 2: Funds (to be) Provided to Site for Month: | 3: Adjust for Inco Neces |
|---|---|---|---|
| | | | Deductions |
| | | $0.00 | $0.00 |
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| | | $0.00 | $0.00 |
| | Totals | $0.00 | $0.00≠ |

**on 3**

| 1: TOTAL FISCAL ACTION FOR NSLP Provision 3: |
|---|
| **$0.00** |

| rrect Payment if sary: | 4: Number of Meals Claimed by the Site: | | | 5: Total Non-Reimbursable Meals: |
|---|---|---|---|---|
| Additions | FREE | REDUCED PRICE | PAID | |
| $0.00 | | | | 0 |
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| $0.00### | 0# | 0# | 0### | 0### |

| 6: Maximum Number of Reimbursable Meals by Benefit Type: | | | 7: Reimbursement Rates for Each I | |
|---|---|---|---|---|
| FREE | REDUCED PRICE | PAID | FREE | REDUCED PRICE |
| 0 | 0 | 0 | | |
| 0 | 0 | 0 | | |
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| Benefit Type: | 8: Reimbursment Claimed by Site: | 9: Maximum Allowable Reimbursement | 10: TOTAL FISCAL AC |
|---|---|---|---|
| PAID | | | |
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| ### | $0.00 | $0.00 | **$0.00** |

# Fiscal Action Formula for Special Milk Program (SM

| Review Information: | | | |
|---|---|---|---|
| **Month Being Reviewed:** | | **Period:** | |
| **SFA Name:** | | **All** | |

| No. | Name of Site | 2: SMP Milk Reimbursement Rate | 3: Number of Non-Reimbursable Milks: |
|---|---|---|---|
| | | $0.00 | 0 |
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# Fiscal Action Formula - Summary

## For Non-Provision Schools, Base Year Provision 2 & 3 Schools, and Non-Base

### Review Information:

| | |
|---|---|
| **Month Being Reviewed:** | |
| **SFA Name:** | |

### Establish Total Fiscal Action:

| | TOTAL |
|---|---|
| Total NSLP - Standard: | $0.00 |
| Total NSLP - SSO: | $0.00 |
| Total NSLP - Provision 2 & CEP: | $0.00 |
| Total NSLP - Provision 3: | $0.00 |
| Total Fresh Fruit & Vegetable Program: | $0.00 |
| Total Afterschool Snack Program: | $0.00 |
| **Total NSLP Fiscal Action:** | **$0.00** |
| Total SBP - Standard: | $0.00 |
| Total SBP - Standard SSO: | $0.00 |
| Total SBP - Provision 2 & CEP: | $0.00 |
| Total SBP - Provision 3: | $0.00 |

| | TOTAL |
|---|---|
| **Total SBP Fiscal Action:** | **$0.00** |
| **Total SMP Errors:** | **$0.00** |

**Year Provision Schools**

**Period:**
**All**