Attachment O (3) Form FNS-640B Administrative Review Data Report

1. STATE	2. PROGRAM	3. AGENCY CODE	4. NAME & ADDRESS OF STATE AGENCY	5. REPORTING YEAR
	CN			School Year 2018-2019

B1. General SFA Information										
			B2-2. Type of School (Enter one [1] for all that apply)							
B1-1. SFA ID #	B1-2. SFA Name	B2-1. School Name	B2-2A. Public	B2-2B. Private	B2-2C. charter	B2-2D. Regular	B2-2E. Boarding	B2-2F. RCCI	B2-2G. Pricing	B2-2H. Closed Campus

		B2. General School Information													
		B2-3. Special Provision Options 1, 2 and 3 (Complete Fields as Applicable)								B2-4. Community Eligibility Provision (Complete Fields as Applicable)					B2-5.
B2-2I. Traditional Schedule	B2-2J. Single Track	B2-3A. Option Being Used (Enter 1, 2, or 3)	B2-3B. Base Year (Select [1] if in base year)	B2-3C. Non-Base Year ([1] if not in base year)	B2-3D. SFA Calculated Free Claiming % or Funding Level	B2-3E. SA Calculated Free Claiming % or Funding Level	B2-3F. SFA Calculated Reduced Price Claiming % or Funding Level	B2-3G. SA Calculated Reduced Price Claiming % or Funding Level	B2-4A. District-Wide ([1] if CEP district-wide)	B2-4B. SFA Calculated ISP (#)	B2-4C. SA Verified ISP (#)	B2-4D. SFA Calculated Free Claiming %	B2-4E. SA Calculated Free Claiming %	B2-5A. FSMC

Food Service System (Select [1] all that apply)					B2-6. CN Programs Offered (Select [1] all that apply)						B2-7. Nonprogram Foods (Select [1] all that apply)					B2-8.OVS (Select [1] if Yes)	B2-9. Ta
B2-5B. Vended	B2-5C. Self Prep (On-Site Prep)	B2-5D. Self Prep (Pre-Packaged Satellite)	B2-5E. Self Prep (Base/Central Kitchen)	B2-5F. Self Pep (Bulk Satellite)	B2-6A. NSLP	B2-6B. SBP	B2-6C. SMP	B2-6D. SSO	B2-6E. Afterschool Snack	B2-6F. FFVP	B2-7A. Adult Meals	B2-7B. Vending to other CN sites	B2-7C. Catering	B2-7D. A la Carte	B2-7E. Other		B2-9A. Yes

...argeted Menu Review (DSAT) (Select [1] all that apply)					B3-1A. Location of Meal Service (Select [1] all that apply)				B3-1. Meal Service Information		B3-1D. Meal Patterns utilized in the school (Select [1] all that apply)					
B2-9B. High Risk	B2-9C. Option 1	B2-9D. Option 2	B2-9E. Option 3	B2-9F. Option 4	B3-1A(a). Cafeteria (Traditional Service)	B3-1A(b). Breakfast in the Classroom	B3-1A(c). Grab and Go	B3-1A(d). Other	B3-1B. # of points where meal counts are taken	B3-1C. Total # of students with program access	B3-1D(a). Pre-K Age/Grade Group	B3-1D(b). K-5 Age/Grade Group	B3-1D(c). 6-8 Age/Grade Group	B3-1D(d). 9-12 Age/Grade Group	B3-1E. Review Period: # Serving days	B3-2A. Total # of Meals Served

B3. School Breakfast Program

B3-2. Day of Review											B3-3A. Total # of Meals Served	B3-3B. # of Ineligibles and/or Second Meals Counted	B3-3C. # Meals Served Missing Meal Components
B3-2B. # of Ineligibles and/or Second Meals Counted	B3-2C. # Meals Served Missing Meal Components	B3-2D. # Incomplete Meals (By Violation Type, leave blank if NA)				B3-2E. Difference (+/-) between SFA and SA Meal Count (#)							
		B3-2D(a). Milk Type	B3-2D(b). Food Quantities	B3-2D(c). Whole Grain Rich Foods	B3-2D(d). Dietary Specifications	B3-2E(a). Free	B3-2E(b). Reduced-Price	B3-2E(c). Paid					

| B3-3. Review Period | | | | | | | B3-4. Recalculation | | | | | | | B4- |
| B3-3D. # Incomplete Meals (By Violation Type, leave blank if NA) | | | | B3-3E. Difference (+/-) between SFA and SA Meal Count (#) | | | B3-4A. Was Recalculation necessary? (Select [1] type below if Yes]) | | B3-4B. In what area was the violation? (Select [1] all that apply) | | B4-1A. Location of Meal Service (Check [1] all that apply) | | | |
B3-3D(a). Milk Type	B3-3D(b). Food Quantities	B3-3D(c). Whole Grain Rich Foods	B3-3D(d). Dietary Specifications	B3-3E(a). Free	B3-3E(b). Reduced-Price	B3-3E(c). Paid	B3-4A(a). Partial	B3-4A(b). Full	B3-4B(a). Performance Standard 1	B3-4B(b). Performance Standard 2	B4-1A(a). Cafeteria	B4-1A(b). Classroom	B4-1A(c). Other	B4-1B. # of points where meal counts are taken

1. Meal Service Information

B4-2. Day of Review

B4-1C. Total # of students with program access	B4-1D. Meal Patterns utilized in the school (Select [1] all that apply)				B4-1E. Review Period: # Serving days	B4-2A. Total # of Meals Served	B4-2B. # of Ineligibles and/or Second Meals Counted	B4-2C. # Meals Served Missing Meal Components	B4-2D. # of Incomplete Meals (By Violation Type, leave blank if NA)				
	B4-1D(a). Pre-K Age/Grade Group	B4-1D(b). K-5 Age/Grade Group	B4-1D(c). 6-8 Age/Grade Group	B4-1D(d). 9-12 Age/Grade Group					B4-2D(a). Milk Type	B4-2D(b). Vegetable Sub-group	B4-2D(c). Food Quantities	B4-2D(d). Whole Grain Rich Foods	B4-2D(e). Dietary Specifications

4. National School Lunch Program

B4-2E. Difference (+/-) between SFA and SA Count (#)			B4-3. Review Period									B4-3E. Differer
			B4-3A. Total # of meals served	B4-3B. # of Ineligibles and/or Second Meals Counted	B4-3C. # Meals Served Missing Meal Components	B4-3D. # Incomplete Meals (By Violation Type, leave blank if NA)						
B4-2E(a). Free	B4-2E(b). Reduced-Price	B4-2E(c). Paid				B4-3D(a). Milk Type	B4-3D(b). Vegetable Sub-group	B4-3D(c). Food Quantities	B4-3D(d). Whole Grain Rich Foods	B4-3D(e). Dietary Specifications		B4-3E(a). Free

							B5. Afterschool Snack Program							
		B4-4. Recalculation						B5-1. Day of Review					B5-2. Revi	
nce (+/-) between SFA and SA Count (#)		B4-4A. Was Recalculation necessary? (Select [1] type below if Yes]		B4-4B. In what area was the violation? (Select [1] all that apply)		B5-1A. Total # of Snacks Served		B5-1B. Counting and Claiming Consolidation Errors (# +/-)			B5-2A. Total # of Snacks Served		B5-2B. C... Conso...	
B4-3E(b). Reduced-Price	B4-3E(c). Paid	B4-4A(a). Partial	B4-4A(b). Full	B4-4B(a). Performance Standard 1	B4-4B(b). Performance Standard 2	B5-1A. Total # of Snacks Served	B5-1B(a). Free	B5-1B(b). Reduced-Price	B5-1B(c). Paid	B5-2A. Total # of Snacks Served	B5-2B(a). Free

	ew Period		
		Counting and Claiming lidation Errors (# +/-)	
		B5-2B(b). Reduced-Price	B5-2B(c). Paid