

Minute Menu HX

Provider Training Workbook

For Providers Using Scannable
Full Bubble Menus

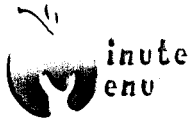


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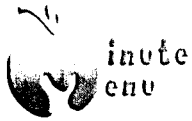
Overview

The Minute Menu system has been designed so that you can quickly and easily record every piece of information required by the USDA Food Program. With a bit of practice you'll soon be able to record an entire meal in only a minute.

This workbook is designed to walk you through all of the paperwork that the Food Program requires. This paperwork includes:



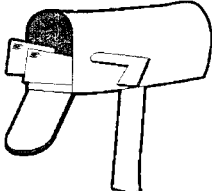
- **Child Enrollment Forms** – filled out and signed by the parents of each new child you enroll into your care (and subsequently into the food program)
- **Infant Menu Forms** – filled out by you each day as you serve meals, used to record both the foods served and the children to whom the foods were served. Infant Menu forms are used for all children in your care that are less than one year of age on the day they attend a meal. If you don't have any children under one year of age in your care, then you don't have to worry about these forms.
- **Regular Menu Forms** – these are just like the Infant Menu forms, except they are used to record meals served to children that are at least 1 year of age on the day they are served a meal.
- **Food Chart** – the food chart we issue contains a list of every food that we approve for you to serve. Each food has a number, and you use that number to record the food served to children on Infant and Regular Menu forms.
- **Claim Information Forms** – these are forms we give you each month so you can easily keep track of the children enrolled your care, making sure your paperwork is accurate and making sure that when we receive your paperwork at the end of the month, so that we can quickly pay you all the money you are owed.

It may seem like quite a bit of paperwork, but it can all be filled out quickly once you get the hang of it. Keep in mind that it's all designed to help you serve nutritious meals to the children in your care – and to ensure you get all the money to which you're entitled as quickly as possible!



General Form Instructions

Before we get started, there are a few general words of wisdom we'd like to share regarding your paperwork:

- ALWAYS use a #2 pencil to fill out your forms. 
- Be sure to keep the carbon copy of every scannable form you send in.
- Don't use your pencil's eraser to erase a bubble. Instead, use a pink school eraser or other good eraser to make sure any bubble you erase doesn't leave a mark. 
- Always sign and date your forms.
- Don't lose your food chart!
- Don't strike through or mark an "X" over areas of a form that you want to leave blank. Just leave it blank. Otherwise, an error will occur.
- Do NOT write notes on the scannable forms. You can write notes on your Claim Information Form (CIF).
- Never staple, fold, or wrinkle any scannable form. Keep forms away from your kids to avoid spills or wrinkles.
- Run through the monthly checklist before you mail your paperwork back to the office each month. 
- Be careful when you mark a bubble:

YES



Mark each bubble properly!

NO



Outside Circle
May Cause Error



Not Enough Pencil Mark
Will Not Read



Left Center of Circle Open
May Not Read



Too Light Did Not Use #2 Pencil
May Not Read



Went Outside Circle Into Next Circle
Will Cause An Error



Enrolling New Children

The child Enrollment Form is used to enroll new children.

A parent must review and sign the form in order for you to receive reimbursements from the Food Program for a child. You are welcome to fill the form out to save your parents some time, but they must review and sign it before you return it to us. Be sure to keep the carbon copy for your records.

Filling Out the Form - Specific Instructions

To fill out the form, go step by step through each numbered section:

1. PROVIDER

We have assigned you a provider number. Every scannable form that you send to us must have your provider number on it. If you forget your provider number, don't worry! It will be printed on each Claim Information Form (CIF) that we send you.

For the purposes of this workbook, let's assume your provider number is 002430. Please note: this is NOT your provider number, it is only used in this workbook. When you fill out an actual form, make sure to use your actual provider number, not 002430.

Look at the section 1. PROVIDER # in the upper left hand corner of the Enrollment form. **Write your Provider # in the white boxes before you bubble it.** Then, in each row, you will bubble in the number for that row. Make sure you always fill in all the rows with a bubble that matches the number you've written.

USE # 2 PENCIL ONLY

P	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
R	0	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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Not
Correct

Correct

USE # 2 PENCIL ONLY

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R		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
O		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
D		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
E		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

USE # 2 PENCIL ONLY

P	0	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
R	4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
O	3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I	2	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
D	0	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
E	0	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. CHILD'S BIRTHDATE

The child's birthday is filled in using two digits for the month, two digits for the day, and two digits for the year (EX: 02/27/02 for February 27, 2002). A common mistake is for parents to put the current year instead of the child's actual year of birth, so make sure to check that before you send in the form. Also, make sure that each row has one and only one bubble marked.

B I R T H D A Y M O N T H D A Y Y E A R	0	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	1	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	2	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	0	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	2	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Birthdate:
January 23, 2002

3. FIRST DAY IN CARE

This box records the date the child first attended care in your home. The date should also be marked with two digits for the month, two for the day, and the last two digits of the year.

4. CHILD'S NAME

The child's name box should be filled in from the top down with the first name, the middle initial, and the last name. Make sure to write in the letters in each box, and to mark the appropriate bubble for that row. You may leave some boxes blank in this section, depending upon the length of the child's name.

Once you've written the child's name, you'll need to assign a child number so that you can record their attendance on the menus. To give the child a number, take a quick look at the sample Claim Information Form (CIF) on the following page.

Claim Information Form (CIF) - December 2003

Long, Shelly
6937 Smithville Rd
Dallas, OH 19246

Provider ID: 255255
Phone: (555) 555-5555

Monitor: Walker, Sherry (15)
County: Ashtabula
License: Type B

Tier: M
Capacity: 6
Tier Exp: ___/___/___

Group	Status	DOB	DOE	Age	Relation	Sp Needs	Sp Diet	Pay Source	School Level	Formula	Sex
1-1						<input type="checkbox"/>	<input type="checkbox"/>				
1-2	A	09/21/1995	04/04/2002	8Y 2M	N	<input type="checkbox"/>	<input type="checkbox"/>				F
1-3	A	11/30/2001	03/01/2003	2Y	N	<input type="checkbox"/>	<input type="checkbox"/>				M
1-4	A	03/01/2003	03/01/2003	9M	N	<input type="checkbox"/>	<input type="checkbox"/>			N/A	M
1-5	A	04/15/1996	04/04/2002	7Y 7M	N	<input type="checkbox"/>	<input type="checkbox"/>				M
1-6	A	11/30/1994	06/26/2002	9Y	N	<input type="checkbox"/>	<input type="checkbox"/>				M
1-7	A	11/05/1998	03/01/2003	5Y	N	<input type="checkbox"/>	<input type="checkbox"/>				F
1-8						<input type="checkbox"/>	<input type="checkbox"/>				
1-9						<input type="checkbox"/>	<input type="checkbox"/>				
1-10						<input type="checkbox"/>	<input type="checkbox"/>				
1-11	A	06/29/1999	04/04/2002	4Y 5M	N	<input type="checkbox"/>	<input type="checkbox"/>				F
1-12	A	11/22/2000	04/04/2002	3Y	N	<input type="checkbox"/>	<input type="checkbox"/>				M
1-13						<input type="checkbox"/>	<input type="checkbox"/>				
1-14						<input type="checkbox"/>	<input type="checkbox"/>				
1-15						<input type="checkbox"/>	<input type="checkbox"/>				
1-16						<input type="checkbox"/>	<input type="checkbox"/>				
1-17						<input type="checkbox"/>	<input type="checkbox"/>				
1-18						<input type="checkbox"/>	<input type="checkbox"/>				
1-19						<input type="checkbox"/>	<input type="checkbox"/>				
1-20						<input type="checkbox"/>	<input type="checkbox"/>				
1-21						<input type="checkbox"/>	<input type="checkbox"/>				
1-22						<input type="checkbox"/>	<input type="checkbox"/>				
1-23						<input type="checkbox"/>	<input type="checkbox"/>				
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1-25						<input type="checkbox"/>	<input type="checkbox"/>				
1-26						<input type="checkbox"/>	<input type="checkbox"/>				
1-27						<input type="checkbox"/>	<input type="checkbox"/>				
1-28						<input type="checkbox"/>	<input type="checkbox"/>				
1-29						<input type="checkbox"/>	<input type="checkbox"/>				
1-30						<input type="checkbox"/>	<input type="checkbox"/>				
1-31						<input type="checkbox"/>	<input type="checkbox"/>				
1-32						<input type="checkbox"/>	<input type="checkbox"/>				

Days your Day Care Was Open for a Holiday: Date(s): _____ Holiday(s): _____

Children Starting Kindergarten/1st Grade: # _____ Grade: _____ # _____ Grade: _____ # _____ Grade: _____

Children leaving your care:

Name: _____ # _____ Last Day in Care: ___/___/___

Name: _____ # _____ Last Day in Care: ___/___/___

List all numbers, reasons and dates for school aged children who attended AM Snack or Lunch:

_____ Reason: _____ Date: ___/___/___

_____ Reason: _____ Date: ___/___/___

_____ Reason: _____ Date: ___/___/___

New Infants that have a Doctor's Statement: # _____ # _____

Signature: _____ Date: ___/___/___

Legend	
Relation	School Level
O - Own Children	A - A.M. Kindergarten
F - Foster Children	D - A.M. Headstart
R - Related, Non-Resident	H - Home School
N - Not Related	K - Kindergarten
H - Helpers Child	L - All Day Headstart
	M - P.M. Kindergarten
	N - No School
	P - P.M. Headstart
	S - School Age
	Y - Year Round School

5. CHILD'S NUMBER and GROUP

You must assign each child a number. This number is used on all other forms (like the Regular or Infant Menu forms). You should assign a unique number, from 1 to 32, to each child you enroll. Quickly look at your CIF and find a blank row. You can use that child number.

Write the child's name on a blank line on the CIF. This way, you can look at the CIF when filling out menus the remainder of this month, and you'll know what number to use for this child.

The number you choose is permanently assigned to this child and cannot be changed once the child is enrolled. You will be able to use the number for a different child only after this child has been withdrawn from care for two months.

Then **mark the child number bubble** as shown below:

4. CHILD'S NUMBER					
1	2	3	4	5	6
7	8	9	10	<input checked="" type="radio"/>	12
13	14	15	16	GROUP Use only if instructed	
17	18	19	20		
21	22	23	24		
25	26	27	28		
29	30	31	32	<input checked="" type="radio"/>	3

Child Number: 11

note the format: child group – child number

4. CHILD'S NUMBER					
1	2	3	4	5	6
7	8	9	10	11	<input checked="" type="radio"/>
13	14	15	16	GROUP Use only if instructed	
17	18	19	20		
21	22	23	24		
25	26	27	28		
29	30	31	32	<input type="radio"/>	3

Child Number: 12

Each month, we will send you a new Claim Information Form (CIF) that lists all of your enrolled children along with their child numbers, so you can more easily keep track of them.

6. CHILD'S SCHEDULE

When supplying Times, Days, and Meals in care, choose the broadest possible option for the child's attendance. For example, if the child normally comes to care on Monday, Wednesday, and Friday starting after school at 3pm, but is sometimes dropped off all week long starting at 7am, then mark all the week days and note the earliest drop off time of 7am and the latest pick up time at the appropriate time (for example, 5:30pm).

7. INFANTS

If the child being enrolled is an infant (defined as under 1 year of age), you must fill out this section.

In the space provided, please write in the brand name of the iron fortified infant formula you offer to parents – even if the parent is supplying their own formula or breast milk.

Then choose one of the following formula options:

Provider Supplies Formula (or Breastmilk is Used)

Parent Accepts the Provider's Formula (or Parent will Supply Breastmilk) and Parent Accepts the Provider's Food

Provider Supplies Formula

Parent Will Supply the Formula but Accepts the Provider's Food

Parent Supplies Formula & Food

Parent Supplies All Formula & Food and Refuses the Provider's Food

Remember: You will only need to fill in this section if the child is under 1 year of age on the First Day In Care.

8. SCHOOL INFO

School Type: Mark only one bubble for the type of school most appropriate for the child. If the child is a toddler or preschooler not enrolled in any sort of kindergarten you can leave this section blank.

Times: For Times in school, put the normal school depart & return time, based on when the child leaves your home to go to school and returns from school to your home.

In many cases, children will go to school directly from their parent's home, but will come to child care after school – except when school is out of session. If this is the case for you, the earliest drop-off time (noted in Step 6) would be the same as the school depart time (noted here in Step 8). So your earliest drop-off time might be early in the morning, perhaps 7am. And this would also be the child's school depart time as well: 7am. The child's school return time might be around 3pm – which on school days is when the child would initially arrive in your child care home. But on days when there is no school, the child would come directly to your home at around 7am and not leave until the latest pick up time (as noted in Step 6).

Days: You only need to mark the child's daily school attendance schedule if the child doesn't normally attend school every day of the week from Monday thru Friday.

Remember: You will only need to fill in this section if the child is attending some type of school.

9. ETHNICITY

Ethnicity & Race is always optional for a parent to indicate, and the categories are defined by federal law.

10. RACE

Ethnicity & Race is always optional for a parent to indicate, and the categories are defined by federal law. Parents can choose more than one Race.

11. RELATION

Please make a note of how the child is related to you. If the child is a day care child, unrelated to you, don't mark anything in this section.

12. SPECIAL INFORMATION

Special Diet: If the child requires a special diet as prescribed by a doctor, mark the "Special Diet" bubble. Also bear in mind that if the child does require a special diet, you should send us a copy of the Doctor's statement on that special diet along with the Enrollment Form, so we can keep that Doctor's statement on file.

Special Needs: If the child is handicapped or is otherwise a special needs child, mark the "Special Needs" bubble. Please note that you must accompany the enrollment form with documentation of the child's special needs.

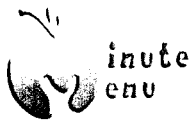
Non-Participating: Any child where this bubble is marked will not be paid as part of the Food Program.

13. PAY SOURCE

Unless you are told by one of our staff to fill this section out, you can ignore it.

14. Other Notes on the Enrollment Form

Be sure the parent supplies the other information requested on the form, including their name, address and phone number. And before you send it to us, **make sure the parent has signed the form**. You cannot be paid for a child if we haven't received an accurately filled-out and signed Child Enrollment form, so be careful!



Food Chart

The color-coded Food Chart is a ready-reference for you that lists every food that qualifies for reimbursement when served to children in your care. We have taken the time to prepare this Food Chart so that it complies completely with the nutritional guidelines of the USDA Food Program, and as long as you serve a food that is on this chart in the appropriate amount and in an appropriate combination with other foods, you can be assured both that the food is nutritionally appropriate for your children and that we won't disallow the meal's reimbursement – so you will get paid.

Take a few moments to review the Food Chart we have provided. You'll notice that some foods have been noted as appropriate only if served at certain meals. Cereals for example, can only be served at Breakfasts and Snacks. Other foods can only be served occasionally. Cookies, for example, can only be served twice a week. Make sure you follow these notes when preparing and serving meals. Otherwise, you won't receive any reimbursements, and more importantly, you may not be providing your children with the nutrition that they need.

The Food Chart has been color coded for your convenience.

- Red – Meat and Meat Alternates
- Brown – Bread and Bread Alternates
- Blue – Milk
- Orange – Fruit or Juice
- Green – Vegetable

These colors correspond to colors on the Regular & Infant Menus.

In addition, certain Infant Foods have been separated into their own section to help ensure you serve nutritionally appropriate foods to infants in your care. **Be sure that when you are recording formula or breast milk served to infants, you use the choices in the Infant Formula section, not the standard Milk section.**

Each food on the Food Chart has been given a number. You will use these numbers to record the food on your Regular or Infant Menu forms, just like you will use the child numbers from your Child Enrollment form to mark attendance. We realize that it may be a bit overwhelming at first. But as you use Minute Menu more, you'll start to memorize the numbers of the foods you use most often, so filling out your Regular and Infant Menu forms will get easier and easier. Also bear in mind that the foods are listed in alphabetical order (for the most part), so that you can usually find the food you're looking for pretty easily.



Recording Meals with Regular and Infant Menu Forms

The Regular and Infant Menu forms are used to record all of the meal-specific information required by the USDA Food Program.

The Regular Menu is used to record meals served to all children 1 year of age or older as of the meal date.

The Infant Menu is used to record meals served to all children under 1 year of age as of the date they are being served. If you don't take care of any Infants, feel free to ignore those sections of this workbook.

At first glance, the Regular and Infant Menu forms can seem a bit overwhelming. With bubbles everywhere, it can be difficult to figure out what to do. But don't worry! The next few pages of this workbook will walk you through the process of filling out these forms, so you'll be completely ready to record your first meal using the Minute Menu paperwork.

General Layout

The Regular and Infant Menus are very similar, and both are divided into three major sections:

1. The form header is everything above the chart with specific food and attendance information. This area of the form contains date and certain special information relevant to the meals recorded on the form.
2. The form body is the chart itself. This chart contains the specific Food Served and Attendance information you will record for every meal you serve in a day (and for up to 3 days on a single form).
3. The form footer is everything below the chart. This area of the form contains your provider number, your signature with a date, and a child count summary for each meal as recorded on the given form.

The Meal Chart

Besides these three main sections, you'll also notice that the forms have three main columns in the form body. Each column is a single day. There are 6 rows for each column, one for each of 6 meals or snacks that can be served that day.

The food components of each meal are different; they are appropriate for the type of meal being served (Breakfast vs. Snack vs. Lunch/Dinner). They are also different on the Infant Menu vs. the Regular Menu, because Infants have different nutritional needs than non-infants. Each of the meal sections has a section to record both food and attendance.

That means that you can *record all of the meals & attendance you serve for up to three days on a single form.*

Filling out the Form: What to do first?

Every time you pick up a new, blank form, you should do the following 7 steps:

In the form footer:

1. Write your Provider # (in the white boxes)
2. Bubble your Provider #
3. Sign the Form
4. Date the Form (today's date is fine)

In the form header:

5. Bubble the Month
6. Write the Meal Date (Day) in the 1st Column
7. Bubble the Meal Date (Day) in the 1st Column

Recording the Meal Date

Each form has three columns, which covers 3 days worth of meals. At the top of each column, you'll see an area to indicate that column's day. Since you've already marked the month above, you will only need to fill out the two-digit day to indicate the date of the meals in that column. For example, if today is March 3rd, 2002, you would have bubbled in March for the month, and in the day column you bubble in zero (0) in the first row and three (3) in the second row. (You don't bubble the year anywhere on this form).

Correct

Not Correct

You'll also notice a bubble to indicate "2nd Serving", as well as two bubbles to indicate Group. You can ignore those bubbles for now, we'll cover them later in this workbook if they apply to you.

Filling Out a Meal

Attendance

For each meal served, you must record every child who attended that meal. You do this by marking each numbered bubble that corresponds to the numbers of the children served. Look at your CIF to determine any child's number, and then bubble in all the numbers needed. Look at the example to the right:

Here, we've bubbled in the numbers 1, 3, 7, 8, and 9. Each one of those numbers represents a child, and these would be children found on our CIF.

ATTENDANCE							
●	2	●	4				
5	6	●	●				
●	10	11	12				
13	14	15	16				
17	18	19	20				
21	22	23	24				
25	26	27	28				
29	30	31	32				

Remember: Mark only child numbers for children under 1 year of age on the Infant Menu, and mark only child numbers for children 1 year of age or older on the Regular Menu.

If a child is turning 1 year old within a month, this means that at the beginning of the month you will record that child on the Infant Menu, and on the child's 1 year birthday and thereafter you will record that child on the Regular Menu.

Foods

Besides recording the children who attended the meal, you must also record the foods that were served. Each food is referenced by its food number, as found on the Food Chart. Milk and Infant Formula are recorded on a single line as a single bubble. All other food items, however, are recorded in a two-line pair, and will be a number from 01 all the way to 288.

shaded hundreds box

← tens line

← ones line

Correct

<table border="1" style="border-collapse: collapse; width: 100%;"> <tr><td>①</td><td>●</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td></tr> <tr><td>②</td><td>0</td><td>●</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td></tr> </table> <p>Food Number: 01</p>	①	●	1	2	3	4	5	6	7	8	②	0	●	2	3	4	5	6	7	8	<table border="1" style="border-collapse: collapse; width: 100%;"> <tr><td>①</td><td>0</td><td>●</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td></tr> <tr><td>②</td><td>0</td><td>1</td><td>●</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td></tr> </table> <p>Food Number: 12</p>	①	0	●	2	3	4	5	6	7	8	②	0	1	●	3	4	5	6	7	8
①	●	1	2	3	4	5	6	7	8																																
②	0	●	2	3	4	5	6	7	8																																
①	0	●	2	3	4	5	6	7	8																																
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●	0	1	2	3	4	●	6	7	8																																
②	0	1	2	3	4	5	6	7	●																																
①	0	1	2	3	4	●	6	7	8																																
●	●	1	2	3	4	5	6	7	8																																

Not Correct

<table border="1" style="border-collapse: collapse; width: 100%;"> <tr><td>①</td><td>0</td><td>●</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td></tr> <tr><td>②</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td></tr> </table>	①	0	●	2	3	4	5	6	7	8	②	0	1	2	3	4	5	6	7	8	<ul style="list-style-type: none"> • Except for Milk or Formula, a food number box must always consist of at least two marked bubbles. • If you want to indicate food number 01, make sure to mark the 0 in the tens place and 1 in the ones place.
①	0	●	2	3	4	5	6	7	8												
②	0	1	2	3	4	5	6	7	8												
<table border="1" style="border-collapse: collapse; width: 100%;"> <tr><td>①</td><td>0</td><td>●</td><td>2</td><td>3</td><td>4</td><td>●</td><td>6</td><td>7</td><td>8</td></tr> <tr><td>②</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>●</td></tr> </table>	①	0	●	2	3	4	●	6	7	8	②	0	1	2	3	4	5	6	7	●	<ul style="list-style-type: none"> • Only mark one bubble per line. • The shaded 1 & 2 box is used to indicate a 1 hundred or 2 hundred food number. • If you want to indicate food number 158, make sure the 1 is marked in the hundred box, the 5 is marked in the tens place, and the 8 is marked in the ones place.
①	0	●	2	3	4	●	6	7	8												
②	0	1	2	3	4	5	6	7	●												

Remember: the color of the food type on this form will match the color of the food on the Food Chart.

Regular Menu: Milk (and Master Menu)

On the Regular Menu, each meal has a series of food components that require two (or three) digit food numbers. These food components include “Meat or Alternate”, “Bread or Alternate”, and “Juice or Fruit or Vegetable”. However, each meal also requires a Milk. But unlike the other food components, Milk only requires one bubble to be marked. The Milk (and Master Menu) section also appears a bit different depending upon the type of meal:

MILK/MASTER MENU (M)	1	2	3	4	5	6	7	8	9
----------------------	---	---	---	---	---	---	---	---	---

Lunch

MILK	1	2	3	4	5	6	7	8	9
MASTER MENU (M)									

AM Snack

MILK	1	2	3	4	5	6	7	8	9
MASTER MENU (M)									

Breakfast

In any case, Milk is always marked the same. Depending upon the type of Milk served, you mark the appropriate bubble. You can always mark only one milk. If a particular non-infant requires a special diet, you will still fill the Regular Menu out as normal (including marking only one Milk), but please note the special diet foods served to that child on the back of your CIF form. Here is an example of how to fill out the Milk bubbles:

Correct

MILK/MASTER MENU (M)	1	2	3	4	5	6	7	●	9
----------------------	---	---	---	---	---	---	---	---	---

In this example, Milk number 8 was marked.

Not Correct

MILK/MASTER MENU (M)	1	2	3	4	●	6	7	●	●
----------------------	---	---	---	---	---	---	---	---	---

In this example, Milk number 8 and 9 were marked, along with Milk number 5. Only one Milk can be marked.

Note on Master Menus: you’ll also note that along with Milk, the words “Master Menu” appear, along with an “M” bubble. This has to do with pre-planned menu templates. We’ll cover this later in the workbook if it’s relevant to you. But this has nothing to do with Milk, so do not mark this bubble when filling in the Milk served.

Infant Menu Foods

Recording the foods that comprise a particular meal is slightly different on the Infant Menu than the Regular Menu. On the Regular Menu, each meal is assumed to have been served to all children 1 year of age and older who are noted as having attended the meal. But on the Infant Menu, each meal is broken down into three smaller age groups:

- 0-3 month olds
- 4-7 month olds
- 8-11 month olds

A 0-3 month old Infant is only to be served Breast Milk or Formula, no matter what the meal is (ie, Breakfast, Snack, Lunch or Dinner). A 4-7 month old can also be served Fruit or Vegetables, along with Infant Cereal, depending upon the meal being served. An 8-11 month old can be served certain meats in addition to the other foods, depending upon the meal being served and on what is developmentally appropriate for that child.

To record this, the Infant Menu form is designed so that each food component that is relevant to the particular age range of a child can be recorded. For example, when you serve a Breakfast, you can serve only Breast Milk / Formula to 0-3 month olds. But there is a section to record Infant Cereal for 4-7 month olds during Breakfast, along with Breast Milk / Formula. And 8-11 month olds can receive Infant Cereal and a Fruit or Vegetable along with Breast Milk / Formula. So each food component as recorded is only relevant to certain children. Here is an example:

		D A Y										SHIFT			
		1	0	●	2	3	SPLIT SHIFT ○				2				
		4	0	1	2	3	●	5	6	7	8	9	3		
		FOOD SERVED										ATTENDANCE			
B R E A K F A S T	IRON FORTIFIED INFANT CEREAL 8 - 11 MONTHS	1	●	1	2	3	4	5	6	7	8	1	2	3	●
	FRUIT OR VEGETABLE 8 - 11 MONTHS	1	●	1	2	3	4	5	6	7	8	9	10	11	12
	IRON FORTIFIED INFANT CEREAL 4 - 7 MONTHS	1	●	1	2	3	4	5	6	7	8	17	18	19	20
	MILK OR FORMULA	●	0	●	2	3	4	5	6	7	8	21	22	23	24
		0 - 3 MONTHS			4 - 7 MONTHS			8 - 11 MONTHS							
		29	30	31	32										

This meal was recorded for the 14th of the month.

Children #: 4, 6, 8, and 15 attended the meal

Food #203 was recorded for 8-11 Infant Cereal

Food #02 was recorded for 8-11 Fruit / Vegetable

Food #201 was recorded for 4-7 Infant Cereal

Milk #11 was served to 0-3 month old children

Milk #13 was served to 4-7 month old children

Milk #11 was served to 8-11 month old children

Special Provision Milk #12 was served to 8-11 month old children

4 children were served, numbers: 4, 6, 8, and 15. Let's assume the following:

- 4 and 6 are both 8-11 month old children, but 4 has a doctor's statement requiring special provision milk
- 8 is a child between 4-7 months
- 15 is a 2 month old child

With this in mind and with a quick look at the Sample Food Chart, this Infant Menu record indicates the following for this meal:

- The two 8-11 month old children – child #4 and #6 – were both served Infant Cereal #203 (Mixed Infant Cereal) and Fruit #02 (Applesauce).
 - Because Child #4 is a special diet child, we assume that child was served 8-11 Formula #12 (Non-Iron Fortified Infant Formula).
 - Child #6 was served 8-11 Formula #11 (Iron-Fortified Infant Formula).
- Child #8 was served Infant Cereal #201 (Barley) and 4-7 Formula #13 (Breast Milk).
- Child #15 was served 0-3 Formula #11 (Iron-Fortified Infant Formula).

Note: Just like on the Regular Menu form, you can only record one Formula for a particular age range UNLESS you record Special Provision Milk (#12) in addition to another Formula.

Also, you'll notice that some of these food number choices came from the "Infant Foods" section of the Sample Food Chart, and others came from the other sections of the Food Chart. Older Infants can be served a wider variety of foods to meet their nutritional needs, so you can feel free to pick foods from the entire Food Chart for these Infants. But make sure those foods are appropriate, as not all the foods on the Food Chart will be appropriate for Infants, no matter what their age.

And finally, make sure when using the Infant Menu that you only record children who are under 1 year of age as of the date of the meal. A child who becomes 1 year old in the middle of a month will be recorded on the Infant Menu initially during the month, and then switched to the Regular Menu on his or her birthday.

Finishing an Infant or Regular Menu form

Regardless of whether you record meals on the Infant Menu, the Regular Menu, or both, once you are finished with a single form page (ie, all three columns of meals have been used), you should review that form in detail to make sure everything looks right. Verify that you've signed and dated the form, that your provider number is bubbled, and that you've marked each meal accurately.

At the bottom of the form near the signature blank, you'll also notice 6 blank spaces:

B _____ AM _____ L _____ PM _____ D _____ EV _____

If your meal times are changing, please note new meal times in these spaces.

Remember: It is important **not** to mark any other information on the menu form. Writing in the margins, between rows, or in any other non-designated area will cause the form to be misread and your check may be affected by these errors.



Claim Information Form (CIF)

We've referred to the Claim Information Form, or CIF, several times in this workbook. And for good reason: the CIF is a very useful quick-reference form that we'll send you every month. Take a quick look at the sample CIF on the following page to familiarize yourself with its content.

The CIF contains a list of all your currently active children and their child numbers. Each child is listed along with the child's age and date of birth (DOB). Pay close attention to the Age category, especially for Infants, as the CIF will indicate the child's age as of the 1st of the month. If a child turns 1 year old within the month, make sure to start recording the child on the Regular Menu on the child's birthday.

The CIF also lists several other pieces of information of relevance to your children:

- each child's status (usually this is just "Active")
- each child's date of enrollment (DOE)
- each child's relationship to the provider
- an indication as to whether each child is a special needs child
- an indication as to whether each child requires a special diet
- the school level of the child
- if the child is an infant, the parent's preference as to who is responsible for supplying formula

You'll notice on the sample CIF that there are several blank spaces between some of the children, indicating several unused child numbers. This is fine! Feel free to skip as many numbers as you like. But make sure you never use the same number for two different children that are in your care at the same time. Each CIF should contain one child per child number – never double up.

Enrolling New Children

You'll use the Child Enrollment form to enroll a new child with the Food Program. But you should also add that child to the CIF so you can keep track of that child and the child's number when filling out forms during the rest of the month. After you send your monthly claim forms into our offices, we'll send you out a CIF with the newly-enrolled child printed on it.

Take some time to review an example CIF, included on the next page.



Monthly Checklist

Before you send in your monthly claim paperwork to our offices each month, run through this checklist – it will help make sure that we can pay you as much as you’re owed as quickly as possible:

- Did you include your Claim Information Form (CIF)?
 - Note children withdrawn
 - Note school aged children out of school and attending during school hours
 - Note anything else we should know
- Is your Provider # filled in on every form page?
- Is the Menu Month filled in on each Menu form page?
- Have you filled in each Day column with the correct date on your Menus?
- Have you filled in every food item on each meal you served?
- Have you filled in attendance for each meal you served?
- Have you signed all the Menu forms?
- Did you have any new child Enrollment Forms to include?
 - If so, did you write the Child’s Name & Number on your CIF?
- Did you keep the carbon copies of every page for your records?



Using Master Menus

Master Menus are pre-planned menu templates that we've pre-approved for you to use. If you serve a meal to your children based on the Master Menu, you can rest assured that the food choices are nutritionally sound for your children, and you won't be disallowed payment for that meal. Plus, it takes less time to record a Master Menu on your paperwork!

We've only developed these pre-approved Master Menus for your children who are 1 year old or older. The nutritional needs of Infants are far too demanding for pre-planned templates. Therefore, you will only record Master Menus on the Regular Menu form.

When you serve a Master Menu, you will mark the Master Menu or "M" bubble for that meal. Next, you will need to record which specific Master Menu you are using. For this, you will need to look at the Master Menu Chart we've supplied to choose the corresponding Master Menu number for the meal you've served. You will mark this number in the lowest "Fruit or Vegetable" row for that meal. That's it! You will still mark meal attendance as normal – indicating which children received that Master Menu – but you don't need to mark the specific foods, because we know which foods were served as part of that Master Menu.

Here's an example:

		FOOD SERVED										ATTENDANCE																							
D		2 0 1 ● 3 2 nd Serving										2																							
A		2 0 1 ● 3 4 5 6 7 8 9 3																																	
Y																																			
B R E A K F A S T	BREAD OR ALTERNATE	1	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
		2	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
	JUICE OR FRUIT OR VEGETABLE	1	0	1	●	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
		2	0	1	2	●	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
	MILK	1 2 3 4 5 6 7 8 9										17 18 19 20																							
	MASTER MENU	●																																	
A M S N A C K	MEAT OR ALTERNATE	1	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
		2	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
	BREAD OR ALTERNATE	1	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
		2	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
	JUICE OR FRUIT OR VEGETABLE	1	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
		2	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
	MILK	1 2 3 4 5 6 7 8 9										25 26 27 28																							
	MASTER MENU	●																																	
L U N C H	MEAT OR ALTERNATE	1	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
		2	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
	BREAD OR ALTERNATE	1	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
		2	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
	FRUIT OR VEGETABLE	1	0	1	2	3	●	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
		2	0	1	2	●	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
	MILK	1 2 3 4 5 6 7 8 9																																	
	MASTER MENU	●																																	

On this day (the 22nd of the month), you served Breakfast, AM Snack, and Lunch to children #1, 2, 6, 11, 12.

For Breakfast, you served Master Menu #23

For AM Snack, you served Master Menu #106

For Lunch, you serve Master Menu #43

Your Master Menu Charts will tell you the foods that correspond to these Master Menu numbers. Take a quick look at the Master Menu Charts we gave you. Can you figure out what foods were served?

Claim Information Form (CIF) - December 2003

Long, Shelly
6937 Smithville Rd
Dallas, OH 19246

Provider ID: 255255
Phone: (555) 555-5555

Moniter: Walker, Sherry (15)
County: Ashtabula
License: Type B

Tier: M
Capacity: 6
Tier Exp: ___/___/___

Group	Status	DOB	DOE	Age	Relation	Sp Needs	Sp Diet	Pay Source	School Level	Formula	Sex
1-1						<input type="checkbox"/>	<input type="checkbox"/>				
1-2	A	09/21/1995	04/04/2002	8Y 2M	N	<input type="checkbox"/>	<input type="checkbox"/>				F
1-3	A	11/30/2001	03/01/2003	2Y	N	<input type="checkbox"/>	<input type="checkbox"/>				M
1-4	A	03/01/2003	03/01/2003	9M	N	<input type="checkbox"/>	<input type="checkbox"/>			N/A	M
1-5	A	04/15/1996	04/04/2002	7Y 7M	N	<input type="checkbox"/>	<input type="checkbox"/>				M
1-6	A	11/30/1994	06/26/2002	9Y	N	<input type="checkbox"/>	<input type="checkbox"/>				M
1-7	A	11/05/1998	03/01/2003	5Y	N	<input type="checkbox"/>	<input type="checkbox"/>				F
1-8						<input type="checkbox"/>	<input type="checkbox"/>				
1-9						<input type="checkbox"/>	<input type="checkbox"/>				
1-10						<input type="checkbox"/>	<input type="checkbox"/>				
1-11	A	06/29/1999	04/04/2002	4Y 5M	N	<input type="checkbox"/>	<input type="checkbox"/>				F
1-12	A	11/22/2000	04/04/2002	3Y	N	<input type="checkbox"/>	<input type="checkbox"/>				M
1-13						<input type="checkbox"/>	<input type="checkbox"/>				
1-14						<input type="checkbox"/>	<input type="checkbox"/>				
1-15						<input type="checkbox"/>	<input type="checkbox"/>				
1-16						<input type="checkbox"/>	<input type="checkbox"/>				
1-17						<input type="checkbox"/>	<input type="checkbox"/>				
1-18						<input type="checkbox"/>	<input type="checkbox"/>				
1-19						<input type="checkbox"/>	<input type="checkbox"/>				
1-20						<input type="checkbox"/>	<input type="checkbox"/>				
1-21						<input type="checkbox"/>	<input type="checkbox"/>				
1-22						<input type="checkbox"/>	<input type="checkbox"/>				
1-23						<input type="checkbox"/>	<input type="checkbox"/>				
1-24						<input type="checkbox"/>	<input type="checkbox"/>				
1-25						<input type="checkbox"/>	<input type="checkbox"/>				
1-26						<input type="checkbox"/>	<input type="checkbox"/>				
1-27						<input type="checkbox"/>	<input type="checkbox"/>				
1-28						<input type="checkbox"/>	<input type="checkbox"/>				
1-29						<input type="checkbox"/>	<input type="checkbox"/>				
1-30						<input type="checkbox"/>	<input type="checkbox"/>				
1-31						<input type="checkbox"/>	<input type="checkbox"/>				
1-32						<input type="checkbox"/>	<input type="checkbox"/>				

Days your Day Care Was Open for a Holiday: Date(s) : _____ Holiday(s) : _____

Children Starting Kindergarten/1st Grade: # _____ Grade: _____ # _____ Grade: _____ # _____ Grade: _____

Children leaving your care:

Name: _____ # _____ Last Day in Care: ___/___/___

Name: _____ # _____ Last Day in Care: ___/___/___

List all numbers, reasons and dates for school aged children who attended AM Snack or Lunch:

_____ Reason: _____ Date: ___/___/___

_____ Reason: _____ Date: ___/___/___

_____ Reason: _____ Date: ___/___/___

New Infants that have a Doctor's Statement: # _____ # _____

Signature: _____ Date: ___/___/___

Relation	Legend	School Level
O - Own Children		A - A.M. Kindergarten
F - Foster Children		D - A.M. Headstart
R - Related, Non-Resident		H - Home School
N - Not Related		K - Kindergarten
H - Helpers Child		L - All Day Headstart
		M - P.M. Kindergarten
		N - No School
		P - P.M. Headstart
		S - School Age
		Y - Year Round School

Recording Special Information on the CIF

Each month, when you send in your Regular and Infant Menu forms (and any Child Enrollment forms that may have been filled out), you must also send in the CIF to our offices. On this CIF, you can make notes as to any information you think we should know about when you prepare your claim reimbursement checks. Below the list of children on the CIF, there are spaces to write in certain specific information that you'll periodically need to tell us about.

Also, after we review your claim information each month, we'll send you a new CIF for use during the next month. In most cases, it takes 2 months for a new child to show up on your pre-printed CIF, so keep this in mind when assigning numbers to new children.

Telling us You Are Open On Holidays

If you were open for business on a holiday when most people normally would be closed (the 4th of July, for example), you should let us know so that we can take that into account when looking at your meal information. Record any holiday dates that you were open for business in the space provided.

Telling Us When Children Start School

If you have a child who is starting Kindergarten or School, you should let us know. Write the child number for any child starting school at a particular level, and indicate which School Level the child is attending (using a code from the Legend).

Telling us When Children Withdraw from Care

If a child withdraws from your care during the month, indicate the child number, the last date in care, and the reason for the withdrawal in the space provided.

Telling us Why School Aged Children Attend AM Snack or Lunch

School-aged children should typically be attending school when AM Snack or Lunch is being served. But sometimes, children stay out of school when they are sick but will still attend care in your home. And sometimes, a child doesn't go to school because school isn't in session that day.

If you serve a school-aged child during AM Snack or Lunch at any time during the month (and it's not during the summer holidays), provide a reason why that child wasn't in school along with the relevant date(s).

Using the CIF your first two months

When you get starting using this paperwork, we won't know the children that are enrolled in your care, so we won't be able to issue you a pre-printed CIF with all of your children already on it. So, you should have a couple of blank CIF for use during the first two months. Fill them out so that they both contain a list of your children with their corresponding child numbers. (There's no need

to supply any of the other child-specific information within the list itself). Make sure they both contain the exact same list of children.

You'll send one copy of these hand-written CIFs into our offices after your first month, and the other after your second month. By that time, you'll have received the pre-printed CIF for your next month, and we'll continue to send you a new CIF every month from then on. And don't forget to write any notes on those CIFs that you think necessary to tell us, just as you would any other month.