July 31, 2009

TO: Small Sponsoring Organizations in the Child and Adult Care Food Program

FROM: Arnette Cowan, MS, RD, LDN
Supervisor, Special Nutrition Programs

SUBJECT: FY 2009-2010 Application Update
Small Sponsoring Organizations

The purpose of this memo is to provide guidance to Small Sponsoring Organizations who seek to continue their participation in Fiscal Year 2009-2010. Participating Small Sponsoring Organizations must update their application for Fiscal Year 2009-2010. The State Agency is asking these Small Sponsoring Organizations to have their completed packet in no later than October 15, 2009. Please refer to the enclosed policy memos 09-08 and 09-09 for additional information concerning renewals, updates and reimbursement.

All Small Sponsoring Organizations
- Agreement (CAC 2) - Participating Small Sponsoring Organizations do not have to submit an agreement this year. The current agreement expires September 30, 2011. However, the following attachments must be submitted.
  - Attachment A- General Terms and Conditions- Each Institution must complete this attachment.
    - If your institution type is Private (for-profit or non-profit), please submit Attachment A for Private Institutions.
    - If your institution is a Unit of State or Federal Government, please submit Attachment A for State Departments.
    - If your institution is a Unit of local government (city or county), please submit Attachment A for Local Government.
  - Attachment B- Certifications. Each Institution must submit a signed copy of the Attachment. Please be sure to complete page 2 of the certifications, including all addresses where business will be conducted. If your sponsoring organization has more than 2 centers, please attach additional sheets. This attachment must be signed by the same representative who signed the agreement (page 6).
  - Attachment C- Notice of Certain Reporting and Audit Requirements –This Attachment must be completed and submitted by for-profit and nonprofit institutions. Please include the month and year that your fiscal year begins and the month and year that your fiscal year ends. Institutions that are Units of Local, State or Federal Government do not have to submit Attachment C.
  - Attachment D – State Grant Certifications-No Overdue Tax Debts – This Attachment must be completed and submitted by for-profit and nonprofit institutions. Two authorizing officials must be named in the attachment and must sign the attachment. This attachment must be notarized. Institutions that are Units of Local, State or Federal Government do not have to submit Attachment D.
    - If you are not a corporation, please complete Attachment D for Individual Subgrantees. This form addresses No Overdue Tax and Conflict of Interest.
- **Attachment E - Conflict of Interest** – There are two forms required for the Conflict of Interest. Page one, Attachment E, must be notarized. The Institution representative signs the form when it is taken to the notary. The Institution must attach its Conflict of Interest Policy to Attachment E. Alternatively, the Institution may adopt the Conflict of Interest Policy included with Attachment E. All private for-profit and non-profit institutions must submit Attachment E and its accompanying Conflict of Interest Policy.
  - If you are not a corporation, you do not have to complete this form. However, you must submit Attachment D for Individual Subgrantees, which also addresses conflict of interest, as indicated above.

- **Advance Payment Request** – submit only if you are requesting an advance. Please note that advances will be recouped, in full, through claim deduction beginning with the month for which the advance is received. For example, if you were issued an advance in October, the advance will be recouped in full when you file your October claim for reimbursement.

- **Institution Application** - The state agency is now required to collect additional information on institution types. Therefore, please indicate if your institution is an educational institution by checking yes or no. Then indicate the type of organization (state government, local government, federal government, private for profit, private nonprofit faith based, private nonprofit secular, other). If you are submitting this form via NC CARES, you do not have to submit a hard copy of the form. Please review the information to ensure that it is current and correct.

- **Administrative Budget for Homes** – Complete and submit if applicable.

- **Administrative Budget for Centers** – Complete and submit if applicable.

- **Media Release for Sponsoring Organizations of Day Care Centers** - The State Agency will issue a statewide media release if the application is approved on or before November 30. If the application is not approved on or before November 30, please submit the enclosed media release with your application packet.

- **Media Release for Emergency Shelters, At-risk Afterschool Care Centers, and Sponsoring Organizations of Emergency Shelters, At-risk Afterschool Care Centers, and Day Care Homes** - The State Agency will issue a statewide media release if the application is approved on or before November 30. If the application is not approved on or before November 30, please submit the enclosed media release with your application packet.

- **Statement of Authority** - Please complete and submit.

- **Preadward Compliance** - Please complete all four questions and submit with your packet. Please note that for question #1, you should specify the ethnicity and race in total numbers, instead of percentages.

- **CACFP Fact Sheet** – Please complete and submit.

- **Management Plan** - Participating Small Sponsoring Organizations are not required to submit a management plan this year. However, if information from 2008-2009 has changed, please log on to nutritionnc.com, print a management plan for Sponsoring Organizations from the 2010 forms and submit with your packet. Please read each question carefully and ensure that all parts of the questions are answered.

- **Truth of Applications and Names and Addresses** – Please complete and submit.

- **Information on Owners and Principals** - Please complete and submit.

- **Certification of Single Exclusive CACFP Agreement** - Please complete and submit.

- **License or Certification** - In lieu of submitting a license for each updating facility, please sign and submit the enclosed certification statement. If the facility is new, please submit a copy of the license.

- **Facility Certification** - Please complete and submit.

- **Training Certification** - Please complete and submit.

- **Participant Information Form** – Please include only new sponsored centers.

- **Food Service Management Contract (CAC 17, if applicable)** – Please include Attachment A-General Terms and Conditions and Attachment B – Certifications. Please be sure the Food Service Management Company completes page 2 of the certifications. This attachment must be signed by the same person who signs the CAC 17 agreement (page 6). If your contract is over $100,000, the contract must go through the public bidding process. Please notify the state agency within 14 days of your bid opening.

- **School Food Authority (CAC 16, if applicable)** - Please include Attachment A-General Terms and Conditions and Attachment B – Certifications. Please be sure the School Food Authority completes page 2 of the certifications. This attachment must be signed by the same person who signs the CAC 16 agreement (page 6).

- **Procurement Policy** - Please review and keep this policy for your files.

- **Administrative Review (Appeal Policy)** – Please review and keep this policy for your files.
Sponsoring Organizations of Centers (please submit these additional forms)

- **Agreement between Sponsoring Organization and Facility** (if applicable) We are now requiring agreements between the Sponsoring Organization and the facility on the same schedule that we are requiring agreements between the Sponsoring Organization and State Agency. Therefore, the agreement between the sponsoring organization and facility will expire on September 30, 2011. Currently participating unaffiliated centers need only submit the applicable attachments. New unaffiliated centers must submit a complete agreement including all applicable attachments.

- **Attachment A - General Terms and Conditions.** Each unaffiliated center must complete this attachment. If the center type is **private** for-profit or non-profit, please submit Attachment A that states Private. If the center type is a **Unit of State or Federal Government**, please submit Attachment A for State Departments. If the center type is a **Unit of local government (city or county)**, please submit Attachment A for Local Government.

- **Attachment B - Certifications.** Each unaffiliated center must submit a signed copy of the Attachment with its agreement. Please be sure that page 2 of the certifications is completed, including all addresses where business will be conducted. This attachment must be signed by the same person who signed the agreement.

- **Attachment C - Notice of Certain Reporting and Audit Requirements** - Attachment C must be completed and submitted by for-profit and non-profit unaffiliated centers. Please include the month and year that the center’s fiscal year begins and the month and year that the center’s fiscal year ends. Centers that are Units of Local, State or Federal Government do not have to submit Attachment C.

- **Attachment D – State Grant Certification-No Overdue Tax Debts** - Attachment D must be completed and submitted by for-profit and non-profit unaffiliated centers. Two authorizing officials must be named in the attachment and must sign the attachment. Centers that are Units of Local, State or Federal Government do not have to submit Attachment D.
  - If the center is not a corporation, please complete Attachment D for Individual Subgrantees. This form addresses No Overdue Tax and Conflict of Interest.

- **Attachment E- Conflict of Interest** – There are two forms required for the Conflict of Interest. Page one, Attachment E, must be notarized. The Center representative signs the form when it is taken to the notary. The Center must attach its Conflict of Interest Policy to Attachment E. Alternatively, the Center may adopt the Conflict of Interest Policy included with Attachment E. All private for-profit and non-profit centers must submit Attachment E and its accompanying Conflict of Interest Policy.
  - If the center is not a corporation, you do not have to complete this form. However, you must submit Attachment D for Individual Subgrantees, which addresses conflict of interest, as indicated above.

- **Center Application (CAC 7)** - Submit one for each facility. If you enter the information via NC CARES, you do not have to submit a hard copy of the facility application. Please ensure that the information on NC CARES is current.

- **Budget for Sponsored Centers** - Complete and submit if applicable.

- **Certification of Eligibility for Title XIX/XX or Free or Reduced Price Meals (New For Profit Centers Only)** - Complete and submit.

- **Food Service Management Contract** (CAC 17, if applicable) – Please include Attachment A-General Terms and Conditions and Attachment B – Certifications. Please be sure the Food Service Management Company completes page 2 of the certifications. This attachment must be signed by the same person who signs the CAC 17 agreement (page 6). If your contract is over $100,000, the contract must go through the public bidding process. Please notify the state agency within 14 days of your bid opening.

- **School Food Authority** (CAC 16, if applicable) - Please include Attachment A-General Terms and Conditions and Attachment B – Certifications. Please be sure the School Food Authority completes page 2 of the certifications. This attachment must be signed by the same person who signs the CAC 16 agreement (page 6).

Sponsoring Organizations of Day Care Homes

- **Agreement between Sponsoring Organization and Day Care Home with Attachments A and B (new day care homes only)**

- **Day Care Home Provider Application** - If you submit this information via NCCARES, you do not have to submit a hard copy of the provider application.

- **Current Day Care Home License for each day care home** - In lieu of submitting a license for each updating day care home, please sign and submit the enclosed certification statement. If the day care home is new, please submit a copy of the license.
Special Note Concerning Reimbursement

Under 7 C.F.R. § 226.10, valid claims must be submitted no later than 60 days following the last day of the full month covered by the claim. Since “update” information is necessary to ensure the institution’s continued eligibility for the CACFP, the institution may not submit and the State Agency will not pay any new-fiscal-year claims until all “update” information is received and approved. It is therefore critical that institutions submit complete “update” information in a timely fashion to avoid a loss of reimbursement.

For example: Institution “ABC” has an existing agreement, but is still required to submit “update” information to remain eligible for reimbursement. ABC delays the submission of its “update” information until December 30th of the new fiscal year. Ultimately, ABC’s “update” materials are approved on January 15. Because January 15 is not within 60 days of October 31 (the last day of the month covered by the claim), ABC cannot claim reimbursement for the month of October.

Attached is a list of the agency staff to whom you should send your packet. Please send in the appropriate number of copies of each form by referring to the bottom of each form. The CACFP application must be legible in blue or black ink or typed. Do not use white out on any of the forms. If you make errors, line through and initial your changes. Make sure all forms are signed and dated by an authorized representative. Please be sure to maintain a copy of your application packet for your files. Additionally, please make sure the most recent version of all forms is used.

Thank you for your time and attention in completing your FY 2009-2010 application update and submitting it to your assigned regional consultant. Please contact the regional consultant assigned to review your application if you have questions.

cc: SNP staff
    Mary Anne Burghardt
    Anteasha Farrell
## Sponsoring Organizations of Centers

<table>
<thead>
<tr>
<th>IF YOU ARE IN THIS COUNTY</th>
<th>SEND YOUR PACKET TO</th>
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<tbody>
<tr>
<td>Alexander, Alleghany, Ashe, Cabarrus, Caldwell, Catawba Davie, Forsyth, Guilford, Iredell, Rowan, Surry</td>
<td>Ta’Monica Wright, Child Nutrition Assistant 4265 Brownboro Road, Suite 115 Winston Salem, NC 27106-2241 336-896-7944 ext. 252 336-896-7684 FAX</td>
</tr>
<tr>
<td>Cherokee, Clay, Cleveland, Gaston Graham, Haywood, Henderson, Jackson, Lincoln, Macon, Polk, Rutherford, Swain, Transylvania</td>
<td>Amy Evans, Child Nutrition Assistant 12910 Betsy’s Gap Road Clyde, NC 28721 828-627-1238 (phone and FAX)</td>
</tr>
<tr>
<td>Durham, Harnett, Johnston, Orange, Wake</td>
<td>Cassandra Williams, Child Nutrition Assistant 1914 Mail Service Center Raleigh, NC 27699 919-707-5754 919-870-4819 FAX</td>
</tr>
<tr>
<td>Bladen, Brunswick, Columbus, Davidson, Hoke, New Hanover, Pender, Randolph, Robeson, Sampson, Scotland</td>
<td>Lorie Stephens, Child Nutrition Assistant P. O. Box 458 Tabor City, NC 28463 910-653-3380 910-653-4573 FAX</td>
</tr>
<tr>
<td>Anson, Cumberland, Lee, Montgomery, Moore, Richmond, Stanly, Union</td>
<td>Deidra Jackson, Child Nutrition Assistant PO Box 25008 Fayetteville, NC 28314 910-486-4064 910-868-7211 FAX</td>
</tr>
<tr>
<td>Carteret, Craven, Jones, Lenoir, Mecklenburg, Onslow, Pamlico</td>
<td>Janet Phelps, Child Nutrition Assistant PO Box 174 Hubert, NC 28539 910-326-2744 910-326-7402 FAX</td>
</tr>
<tr>
<td>Avery, Buncombe, Burke, Madison, McDowell, Mitchell, Watauga, Wilkes, Yadkin,Yancey</td>
<td>Denise Laursen, Child Nutrition Assistant PO Box 9788 Asheville, NC 28815-0788 828-296-1113 828-296-1367 FAX</td>
</tr>
<tr>
<td>Alamance, Caswell, Duplin, Franklin, Granville, Green, Halifax, Nash, Northampton, Person, Rockingham, Vance, Warren, Wayne</td>
<td>Elizabeth Julye, Child Nutrition Assistant PO Box 5 Castalia, NC 27816 252-459-7023 252-459-7035 FAX</td>
</tr>
</tbody>
</table>

Please be sure to maintain a completed copy of your application packet for your files.
<table>
<thead>
<tr>
<th>Agreement Number and Sponsor Name</th>
<th>Send your packet to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>6933 - Burke Co. Child Care Connections 7107 – Nutrition Plus</td>
<td>Amy Evans, Child Nutrition Assistant 12910 Betsy’s Gap Road Clyde, NC 28721 828-627-1238 (phone and FAX)</td>
</tr>
<tr>
<td>7297 – Child Advocacy and Parenting Place Exchange Club Center, Inc.</td>
<td>Denise Laursen, Child Nutrition Assistant PO Box 9788 Asheville, NC 28815-0788 828-296-1113 828-296-1367 FAX</td>
</tr>
<tr>
<td>7166 – Child Care Connections 7343 – Ft. Bragg Child and Youth</td>
<td>Cassandra Williams, Child Nutrition Assistant 1914 Mail Service Center Raleigh, NC 27699 919-707-5754 919-870-4819 FAX</td>
</tr>
<tr>
<td>7422- Children and Youth</td>
<td>Janet Phelps, Child Nutrition Assistant PO Box 174 Hubert, NC 28539 910-326-2744 910-326-7402 FAX</td>
</tr>
<tr>
<td>6895 – Child Care Directions</td>
<td>Deidra Jackson, Child Nutrition Assistant PO Box 25008 Fayetteville, NC 28314 910-868-7211 FAX</td>
</tr>
<tr>
<td>7196 – Wayne Action Group for Economic Solvency (WAGES) 7318 - Family Resources, Inc. 6782 – TKT Family Resources</td>
<td>Ta’Monica Wright, Child Nutrition Assistant 4265 Brownboro Road, Suite 115 Winston Salem, NC 27106-2241 336-896-7944 ext. 252 336-896-7684 FAX</td>
</tr>
<tr>
<td>7740 – Child Care Networks 7095 – Person County Partnership for Children</td>
<td>Melanie Crews, Child Nutrition Assistant #104,740 Greenville Blvd., Suite 400 Greenville, NC 27858 252-756-1037 252-756-0673 FAX</td>
</tr>
<tr>
<td>7272- Southwestern Child Development 7212 – Buncombe County Child Care Services</td>
<td>Elizabeth Julye, Child Nutrition Assistant PO Box 5 Castalia, NC 27816 252-459-7023 252-459-7035 FAX</td>
</tr>
<tr>
<td>7177 – MCAS Child Dev. Center 7391 – MCAS New River</td>
<td>Lorie Stephens, Child Nutrition Assistant P. O. Box 458 Tabor City, NC 28463 910-653-3380 910-653-4573 FAX</td>
</tr>
<tr>
<td>7506 – Cape Fear Tutoring 7167 – Capitol Nutrition, Inc. 7461 – Child Care Resources 7119 – Child Care Services Association 7484 – Child Nutrition Programs 7644 – Coastal Nutrition Services 7448 – T&amp;T Tutoring 7044 – Guilford Child Development</td>
<td>Donna Beard, Child Nutrition Assistant 1914 Mail Service Center Raleigh, NC 27699 919-707-5773 919-870-4819 FAX</td>
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