North Carolina Department of Health and Human Services  
Women’s and Children’s Health  
Child and Adult Care Food Program  

ADVANCE PAYMENT REQUEST

Institution Name: _______________________________  Agreement #: __________________

Mailing Address:  _______________________________________

Street Address:  _______________________________________

City, State and Zip:  _______________________________________

Advance payments are administered based on considerations of prior reimbursement claims and/or other information as deemed appropriate with substantiating documentation. By accepting this advance, the Institution agrees that the advance will be recouped in full through claim deductions beginning with the month for which the advance was received. Advance payments will not be made after April 2011. If the Institution’s Agreement is terminated and the advance has not been recouped in full as of the date of termination, the Institution agrees that the outstanding advance balance is immediately due and payable to the State Agency.

This advance payment agreement will be effective with respect to meals served during the period commencing the 1st day of ____________, 20__, and ending the 30th day of September, 2011.

Signature on Behalf of Institution

The undersigned represents the Institution and has the authority to request an advance for and on behalf of said Institution. The undersigned further represents that s/he has read, understands, and agrees to the terms of this request.

By: ________________________________________________  Title: ____________________________

(Must be signed by the same person who signs the Agreement)

Date: ______________________________

State Agency Representative

By: _______________________________  Signature of SNP Unit Manager

Date: ______________________________

For State Agency Use Only

Approved for Payment

Initials: _____  Date: __________

DHHS T-CAC 2A (06/10)  
Nutrition Services  
Submit all four copies to the State Office

Routing:  Original – SNP Program File; Yellow: SNP Consultant; Pink: Controller's Office; Gold: Institution