

ACKNOWLEDGEMENT OF PROCEDURES FOR AFTER SCHOOL MEALS/SNACKS REIMBURSABLE PROGRAM



| TO: | , Region Food Service | : Supervisor | |
|---|---------------------------|--|---------------------|
| FROM: | , Food Service Mana | ger/Satellite Assistant | |
| School Name: | Pro _i | gram Name: | |
| The information in this memory program. All questions/conce | | h the after school care manager of th | e after school care |
| Signature of Food Service Ma | nager/Satellite Assistant | Date | |
| TO: | , Region Food Service | e Supervisor | |
| FROM: | , After School Care N | <i>N</i> anager | |
| School Name: | Proį | gram Name: | |
| | | me by the food service manager/sate rovided to all after school care activit | |
| Signature of After School Care | e Manager | Date | |

A signed copy must be submitted to your region food service supervisor.