

IEF PROVIDER LETTER

Dear Provider:

To qualify for tier I reimbursement, or if you wish to receive reimbursement for meals served to your own children under the U.S. Department of Agriculture's Child and Adult Care Food Program (CACFP), you must qualify by following the instructions below:

To qualify for tier I reimbursement you must either (a) live in an area that is eligible based on economic need as determined by school enrollment or census data, or (b) establish economic need through the information provided on the enclosed Income Eligibility Form. We will first try to establish tier I eligibility by area.

If your home does not qualify by area, our office will use the information provided on the IEF by using either income or information showing you are participating in an eligible assistance program. Please be sure and read the directions completely. Make sure you complete and sign the form.

When reporting income, report all household income (not just your family day care home business income). Everyone in your household (such as grandparents, other relatives, or friends who live with you) who shares income and expenses must be included on the IEF. The records you send must show the name of the person who received the income, the date it was received, how much was received, and how often it was received these records should be statements form work or other forms of income. The income you report must be the total gross income. If last month's income does not accurately reflect your circumstances, you may provide a projection of your monthly income. If you operated a family day care home business last year, attach a copy of your most recent tax return, including Schedule C unless it does not accurately reflect your current income.

If your household's income is equal to or less than the amounts indicated for your household's size on the attached Income Chart, you will receive a higher level of reimbursement. Once properly approved as a tier I provider or to claim your own children, you will remain eligible for those benefits until the IEF expires in a year. You should notify us if you or someone in your household becomes unemployed and the loss of income during the period of unemployment causes your household income to be within the eligibility standards.

If your housing is part of the Military Housing Privatization Initiative and you receive the Family Subsistence Supplemental Allowance, do not include these allowances as income. If you household has deployed service members, only that portion of a deployed service member's income made available by them or on their behalf to the household will be counted as income to the household. Combat Pay, including Deployment Extension Incentive Pay (DEIP) is also excluded and will not be counted as income to the household. All other allowances must be included in your gross income.

If you or anyone in your household qualifies for SNAP (Food Stamps), Food Distribution Program on Indian Reservations (FDPIR), or Family Employment Program (FEP), write the case number in the space provided on the IEF and provide a copy of the benefit determination letter from the appropriate agency.

You or your children do not have to be U.S. citizens to complete the form or participate on the program. **Return the completed form and other papers to: [at name, address, phone number].**

If you do not live in an area of economic need, or don't want to submit the IEF, you will receive lower rates of reimbursement for meals served to children enrolled in your day care.

Even if you live in an area identified as one of economic need, or you have already been classified as a tier I home, you must complete this form if you want to claim meals for your own children. Our office may verify the income information you submit. If any of your children qualify for free or reduced-price lunch at school and you have received a letter from the school or district notifying you of this, you may send a copy of the letter instead of filling out an IEF. A copy of one of these letters can only be used to qualify to claim your own children.

If you have other questions or need help, call **[phone number]**.

Sincerely,

[signature]