Illinois State Board of Education Nutrition and Wellness Programs Child and Adult Care Food Program

Monthly Documents Checklist

Mon	th/	Year
Men	u a	nd Meal Service Documentation
		Menus
		Physicians Statements for Food Substitutions (67-48)*
		Infant Formula/Food Waiver Notifications*
Enro	llm	ent and Eligibility Documentation
		Enrollment Forms (67-98)* (exempt: at-risk, license-exempt outside school hours and emergency shelter programs)
		Household Eligibility Applications and Instructions (69-88)* (exempt: Head Start, Even Start, at-risk and emergency shelter programs)
		Electronic Direct Certification printouts from IWAS* (exempt: Head Start, Even Start, at-risk and emergency shelter programs)
		Intake documentation* (emergency shelters only)
		Master List (67-95); Master List for Emergency Shelters (67-92); Master List for Head Start or Even Start (65-10)
		Attendance
Meal	Co	ount Documentation
		Meal Participation Records (68-75D); (68-75); (69-04); and/or At-Risk Meal Count Forms (69-14)
		Meal Participation Records for Adults (68-31)
		Total Meals Recap (67-22)
Train	ing	g Documentation
		Training Form (67-25)*
Finar	ncia	al Documentation
		Itemized invoices/receipts for all expenses
		Itemized documentation for all revenues
		Delivery tickets (for contracted meals only)
		Food Donations (68-77)
		Cash Disbursements (67-24)
		Personnel Activity Reports (67-54)
		Monthly Profit or Loss Summary (67-93)
		Monthly Milk Purchase Estimate (68-50)
		Annual Financial Report Spreadsheet
Clain	n fo	or Reimbursement Documentation
		For-profit Eligibility Form (67-91) plus supporting documentation (for-profit institutions only)
		Edit Checks 1 and 2 (65-09) (multi-site sponsors only)
		Monthly claims (available in WINS)

^{*}These documents are valid for 12 months upon completion, but may be referred to monthly. Additionally, as new children enroll or as new staff is hired, these documents must be collected or updated and maintained.