

Nebraska Department of Education
Office of Nutrition Services
 SFSP Claim Entry Hints & Tips (4-2-2020)

Click on "Claims" in white letters at the top. Then click on "Claim – SFSP" under "Item".

Summer Food Service Program

NEBRASKA
DEPARTMENT OF EDUCATION

Applications | **Claims** | Compliance | Reports | Security | Search | Programs | Year | Help | Log Out

Claims > Program Year: 2019 - 2020

Item	Description
Claim - SFSP	Summer Food Service Program Claims
Claim Rates	View current claim rates
Payment Summary	Summary of payments made to this Sponsor

Select the Month for which you want to submit a claim

Claim Month	Adj Number	Claim Status	Date Received	Date Processed	Earned Amount
Oct 2019					\$0.00
Nov 2019					\$0.00
Dec 2019					\$0.00
Jan 2020					\$0.00
Feb 2020					\$0.00
Mar 2020	0	Pending			\$0.00
Apr 2020					\$0.00
May 2020					\$0.00
Jun 2020					\$0.00
Jul 2020					\$0.00
Aug 2020					\$0.00
Sep 2020					\$0.00
Year to Date Totals					\$0.00



Select "Add" next to the site for which you want to submit a claim.

Actions	Site #	Site Name	1st Meal Amount	2nd Meal Amount	Previous Amount	Errors	Status
Add	0001	Ashland Park/Robbins	\$0.00	\$0.00	\$0.00		

1. Enter the total number of meals served – there will be text boxes next to each of that site’s approved meal services. In this example, the site was approved for breakfast only.
2. Calculate Average Daily Attendance by dividing the total number of all meals served in the month by the number serving days.
3. Enter total number of meals served in First Meals Served.

General Information

	Total Number of Days Food Served	Average Daily Attendance
1. Breakfast	1	2
2. AM Snack	0	0
3. Lunch	0	0
4. PM Snack	0	0
5. Supper	0	0

Self-Prep and/or Vended-Rural Meals Served to Children

Report only meals meeting the requirement on the agreement.

	First Meals Served	Second Meals Served
6. Breakfast	3	0
7. AM Snack	0	0
8. Lunch	0	0
9. PM Snack	0	0
10. Supper	0	0

Created By: tYarmon on: 4/1/2020 8:51:04 PM Modified By: tYarmon on: 4/1/2020 8:51:04 PM

Save Cancel



Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Mar 2020	0				

The Site Claim has been saved.

< Edit **Finish**

Repeat adding site claims for each site operated during the claim month. When all site claims have been entered, click the red "Continue" button at the bottom of the list of sites.

< Back **Continue** Upload Claim Data

You will be taken to a claim summary page where you will mark the certification box at the bottom of the page and then click the red "Submit for Payment" button.

Claim Reimbursement Total **0.00**

Certification

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise." U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

< Back **Submit For Payment**

