

ACKNOWLEDGEMENT OF PROCEDURES FOR AFTER SCHOOL MEALS/SNACKS REIMBURSABLE PROGRAM



ТО:	, Food Service	Supervisor		
FROM:	, Food Service I	Manager/Satellite Assistant		
School Name:		Program Name:		
The information in this memo has beer program. All questions/concerns have		d with the after school care	manager of the after school ca	re
Signature of Food Service Manager/Sat	rellite Assistant	_	Date	
TO:	, Food Service	Supervisor		
FROM:	, After School C	Care Manager		
School Name:		Program Name:		
The information in this memo has bee questions/concerns have been address		•		ll my
Signature of After School Care Manage	r	_	 Date	

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