

ORDER FORM FOR SPONSORS OF DAY CARE HOMES

In case we need to call: Phone _____ Date _____

ALL ORDERS will be shipped to the Sponsor address on file Package should be sent to the attention of _____ See FORM DESCRIPTIONS on Back

QUANTITY	FORM #	FORM NAME
	1377	Crediting Foods in CACFP
	1378	Spanish 1377
	4066 was AD-475-C	And Justice for All poster
	4364	Good Nutrition Pays in DCH
	4384	Spanish 4364
	4385	Chinese 4364
	4386	Russian 4364
	4421	Together We Can Raise Healthy Children
	4422	Spanish 4421
	4423	Italian 4421
	4424	Chinese 4421
	4425	Korean 4421
	4426	Russian 4421
	4427	French 4421
	4428	Haitian-Creole 4421
	CACFP-102	Healthy Child Meal Pattern
	CACFP-102ar	Arabic
	CACFP-102es	Spanish
	CACFP-102ht	Haitian-Creole
	CACFP-102ko	Korean
	CACFP-102ru	Russian
	CACFP-102zh	Chinese
	CACFP-103	Healthy Infant Meal Pattern
	CACFP-103ar	Arabic
	CACFP-103es	Spanish
	CACFP-103ht	Haitian-Creole
	CACFP-103ko	Korean
	CACFP-103ru	Russian
	CACFP-103zh	Chinese
	CACFP-104	Reference Chart: Provider Update/Changes in CIPS
	CACFP-109	Sample Infant Lunch Menus
	CACFP-121	Statement Regarding Infant Feeding
	CACFP-127	60/90-Day Calendar

QUANTITY	FORM #	FORM NAME
	CACFP-152	Is My DCH Breastfeeding Friendly?
	CACFP-160	On-Site Provider Addendum
	CACFP-170	Fraud & Abuse Report Form
	CACFP-171	DCH Menu
	CACFP-171es	Spanish
	CACFP-178	Healthy Child Meal Pattern Requirements & Recommendations
	CACFP-178es	Spanish
	CACFP-182	Sample Child Care Menus
	CACFP-199	DCH Infant Men – Br/AM/L/PM/Su/LN
	CACFP-200	US and NYS Breastfeeding Labor Laws
	CACFP-3705	DCH Continuous Application & Agreement
	CACFP-3978	DCH Order Form
	CACFP-4118	DCH Monitor Checklist
	DOH-3805	DCH Application for Start-Up or Expansion Payments
	DOH-4160	Letter to Households/Tier II DCH Participant
	DOH-4160es	Spanish
	DOH-4161	Letter to Households/DCH Provider
	DOH-4161es	Spanish
	DOH-4219	Provider Transfer Form
	DOH-4419	DCH Child Enrollment Form
	DOH-5063	Application for Close-Out Payments
	DOH-5128	Child Meal Disallowance
	DOH-5128es	Spanish
	DOH-5162 was CACFP -106	Pre-approval Checklist for Enrolled Caregivers and DCH Providers
	FNS-258	CD - Feeding Infants Guide

FUNDING TO FEED CHILDREN OUTREACH FLYERS			
Counties: _____			
English	bs-Bosnian	es-Spanish	ht-Haitian-Creole
kar-Karen	ru-Russian	yim-MaayMaay	zh-Chinese

WIC
4081/English
4082/Spanish

BUILDING FOR THE FUTURE										
English	ar-Arabic	bn-Bengali	bs-Bosnian	es-Spanish	fr-French	he-Hebrew	hmn-Hmong	ht-Haitian-Creole	ja-Japanese	
kar-Karen	km-Khmer	lo-Lao	pt-Portuguese	ru-Russian	th-thai	vi-Vietnamese	yi-Yiddish	yim-MaayMaay	zh-Chinese	

This institution is an equal opportunity provider.

FORM DESCRIPTIONS

FORM #	DESCRIPTION
1377	Resource identifying reimbursable foods in CACFP
4066 was AD-475-C	Poster must be displayed at sponsor's office/centers where parents can see it
4364	Brochure for providers explaining CACFP
4421	Brochure for parents explaining the benefits of having a child care provider that participates in CACFP
CACFP-102	Chart indicating required components and minimum quantities of food for children in care who are 1-12 years
CACFP-103	Chart indicating required components and minimum quantities of food for infants in care who are less than 1 year old
CACFP-104	Guidelines for submitting provider updates or other changes
CACFP-109	Sample lunch menus for infants
CACFP-121	Must be completed by the parent/guardian to select or revise the facility's offer to provide infant formula or other meal components
CACFP-127	Chart indicating the 60-day postmark deadline for monthly claims and the 90-day postmark deadline for adjusted claims
CACFP-152	Breastfeeding friendly self-assessment questions
CACFP-160	Used to document changes in the on-site provider in homes owned by another person or corporate entity
CACFP-170	CACFP Fraud & Abuse Report Form
CACFP-171	Menu planning form
CACFP-178	Recommendations and requirements for healthy meals

FORM #	DESCRIPTION
CACFP-182	Sample daily menus for children
CACFP-199	Individual menu record for infant meals – breakfast – AM snack – lunch – PM snack – supper – LN snack
CACFP-200	Breastfeeding labor laws that apply to all participating sponsors and sites
CACFP-3705	Application and agreement for a day care home to participate in CACFP.
CACFP-3978	To order DCH forms
CACFP-4118	Checklist used by sponsors to document required monitoring of providers
DOH-3805	To apply for start-up or expansion payments
DOH-4160	Letter, income eligibility guidelines and application for households of children participating in a Tier II home. This form should be used to qualify children in a Tier II home for Tier I rates.
DOH-4161	Letter, income eligibility guidelines and application for providers. This form should be used to document eligibility to claim provider's own or resident children and for Tier I eligibility verification.
DOH-4219	Used by provider to transfer to another Sponsor
DOH-4419	Used to obtain annual enrollment information for children in day care homes
DOH-5063	Used to apply for close-out payments
DOH-5128	Provider meal disallowance form
DOH-5162 was CACFP -106	Form to be used when conducting the pre-approval visit for a new provider
FNS-258	The Feeding Infants Guide is available on CD only

Forms can also be found at www.health.ny.gov/CACFP

Submit your order using **ONE** of these options:
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Mail to: NYS DOH CACFP – Orders 150 Broadway Room 650 Albany, NY 12204
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OR

Fax to: (518) 402-7252 <i>No need for cover page</i>

OR

Email to: CACFP@health.ny.gov
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For information about an order placed with CACFP, call 1-800-942-3858