

## CACFP ON-LINE CLAIMING AGREEMENT

Provider Name (please print) \_\_\_\_\_ Date \_\_\_\_\_

(Provider must submit claims for 3 months on hard copy menu and attendance forms before beginning online claiming.)

I confirm and agree to the following:

1. I have a connection to the internet.
2. I have a Web Browser (Internet Explorer or Mozilla).
3. In order to have my records available for home visits: (choose one of the following options)
  - a. \_\_\_I will locate my computer so that I can access it and produce the needed screens for the Nutrition Consultant, state or federal CACFP representative to review and continue to supervise the children.
  - b. \_\_\_I will print my records daily and have the printed copies located so that I can have access to them and continue to supervise the children.
  - c. \_\_\_I have an assistant who will be available at all times to supervise the children so that I can go to my computer and print the forms.
  - d. \_\_\_I will keep menus and attendance daily on the scan able forms. If you choose this option you must make copies of the forms to have a supply on hand at all times.
4. I will have my menus and attendance available for review when my Nutrition Consultant or any representative of the Missouri CACFP or the USDA conducts a visit at my child care home. If you are unable to produce daily records your Nutrition Consultant will contact the office to see if your records are up to date. United 4 Children strongly recommends that you print your records daily or keep records on paper forms, which will protect you should your computer fails to operate.
5. I will keep scan able forms at my child care home in case of computer failure.
6. If my computer fails so that at the end of the month I am still unable to record online I will transfer my information from the copied forms to the actual scan able forms.
7. I will notify the office that I will be submitting part or all of my claim on the scan able forms and I will request that the office submit for me the part of the claim that was recorded online. Copied forms should never be mailed to the office. They are only used to track menus and attendance until you are able to enter them online. If you need to submit any days on paper you must transfer the information to the scannable forms.
8. I understand that United 4 Children cannot offer technical support for my computer.
9. I will send other documentation or information needed to process my claim so that it reaches the United 4 Children office by the 25<sup>th</sup> of the same month I am claiming. This includes: license changes (for licensed provider), a copy of your license (for registered providers that become licensed), related child in care form, infant feeding preference form, or any other forms needed to process your claim. I understand that if these papers are not in United 4 Children's office by the 25<sup>th</sup>, they will not be applied to the current claim and adjustments will not be made.
10. I will submit my online claim by the 3rd of the month by **4:30pm**
11. I will notify Rose Hasting by e-mail at [hastingr@united4children.org](mailto:hastingr@united4children.org) by the end of the month when school age children are present during normal school hours. (school closings, holiday breaks, snow days, teacher's institute days, etc.). I will include child's name, number, and date(s) in attendance at child care.
12. If I change my e-mail address, I will e-mail the change to [hastingr@united4children.org](mailto:hastingr@united4children.org) immediately.

I have been trained on online claiming and have read and understand this agreement.

Provider Signature: \_\_\_\_\_ Provider ID#: \_\_\_\_\_

E-mail address (required – please print clearly) \_\_\_\_\_

Return to United 4 Children, 1310 Papin Street, Suite 100 B, St. Louis, MO 63103 or Fax to 314-531-4184.  
After U4C receives this agreement in the office, we will copy it and mail it back to you with instructions pertaining to online claiming. Keep this agreement with your CACFP paperwork.

Office Use Only

Provider Start Date: \_\_\_\_\_



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