Claim Summary and Errors Report

Provider: 6381 Claim Month: June 2023 Claim Source: WEB Pay Type: DD

Upon receiving your claim information, we reviewed each meal to ensure appropriate nutritional and other guidelines were followed. Any problems encountered during that review have been noted below. The errors listed below have been used to deduct meals from your claim as indicated. If you have any questions about these errors, you must contact the office by the 10th of the month following the month claimed.

Thank you for continuing to provide nutritious meals and snacks to the children in your care. We appreciate all your efforts.

Sincerely,

Training Sponsor

15:	hnson, I 14 Red I Iblin CA	Bird Plac	ce			County: Alameda			Monitor: LJ (100) Phone: (972) 671-5211		
<u>Tier 1</u> <u>Tier 2</u>	Brk 64 0	AMS 0 0	Lun 76 0	PMS 79 0	Din 0 0	EVS 0 0	Tier 1 Amt: Tier 2 Amt: Claim Amount:	413.91 413.91	Tier 1 State Amt Tier 2 State Amt State Claim Amt	20.74	
DisAllowed Tier 1 Tier 2	Brk 22 0	AMS 5 0	Lun 12 0	PMS 2 0	Din 0 0	EVS 0 0					

32 You are not approved to offer a particular meal that was served.

- 6/13:A - Meal Disallowed

38 The child was not yet enrolled as of meal date.

- Baker, Elliot - 6/02:R-BLP - Child Disallowed

104 Provider exceeded overall/school aged capacity

- Over by 1 child(ren) - 6/28:B#1L#1P#1 - Child Disallowed

110 Child file indicates the child doesn't normally attend given meal.

 $- Ann, Mary - 6/05: R-B, 6/07: R-B, 6/09: R-B, 6/13: R-B, 6/15: R-B, 6/16: R-B, 6/19: R-B, 6/20: R-B, 6/23: R-B, 6/26: R-B, 6/27: R-B-Child\ Disallowed$

187 A meal with whole grain-rich bread/alternate component was not served on this day.

- 6/07:L, 6/12:B, 6/13:A, 6/14:B, 6/21:L - Meal Disallowed

08 / 08 / 2024 3:51:21PM Page 1 of 1