



Michigan Office
139 W. Lake Lansing Rd., Suite 120 • East Lansing, MI 48823
Telephone: (800) 234-3287 • FAX: (517) 332-5543

Illinois Office
4415 W. Harrison St., Suite 535 • Hillside, IL 60162
Telephone: (800) 284-5273 • FAX: (708) 391-8242
Email: Centers@acdkids.org

www.acdkids.org

Claim Information Form (CIF)

Please check boxes next to documents included

Center Name:	Claim Month:
Submitted by:	
List of documents required for reimbursement for ALL child care centers	
<input type="checkbox"/> Master list of all children	
<input type="checkbox"/> Menu for all ages - Menu must match what is on the system	
<input type="checkbox"/> Original, Signed At Point of Service Meal Count	
<input type="checkbox"/> Receipts for food, milk and other allowable expenses	
<input type="checkbox"/> Personnel Activity Report - Signed, Dated & Job Title	
<input type="checkbox"/> Household Eligibility Form (HEA)	
<input type="checkbox"/> Enrollment Form - Will be approved within the month it was received in the ACD office	
<input type="checkbox"/> Infant Waiver - If Applicable listing IFIF and IFIC	
<input type="checkbox"/> Medical Exception Statement - If applicable	
<input type="checkbox"/> Daily Catering Invoices for the month	
<input type="checkbox"/> List school age children that were in you care all day on a school day (i.e. snow day, sick day, etc.) on the back of this Claim Information Form	
<input type="checkbox"/> Master list of Children enrolled in Head Start - Award letter must be on file in the ACD office	

All items listed above must be submitted no later than the 5th of each month in order to assure a timely submission to the Illinois State Board of Education. Failure to do so could result in a delay or loss of payment for the month.

ACD will not process your claim until all required documents have been received.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. This institution is an equal opportunity provider. (11/2016)