Alabama's Implementation of USDA Smart Snacks in School and Exempt Fundraisers Form

| .1100 | l Name | | | | |
|--|---|-----------|--------------|--|--|
| leas | e check one:July 1J | anuary 1 | | | |
| orm | rm should be completed and signed by the principal before the fundraisers commence. | | | | |
| | Sponsoring Organization | Item Sold | Date of Sale | | |
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Developed: May 2015

Annual Attestation Statement

| DATE: | | | | |
|------------------------------|--|--|--|--|
| FROM: | [School Food Authority Superintendent] | | | |
| TO: | [State Agency Official and Title] | | | |
| SUBJECT: School and Fu | Attestation of Compliance with Alabama Implementation of USDA Smart Snacks in andraising Activities | | | |
| superintende School Break | The following statement must be signed by the school food authority (SFA) into perating exempt food fundraisers in schools with National School Lunch and/or stast Programs, and filed as outlined in the Alabama Implementation of USDA in School and Fundraising Activities. | | | |
| Ι | , as the superintendent of | | | |
| | [SFA Name], do hereby attest that the | | | |
| aforemen | aforementioned SFA and all schools under its jurisdiction operating the National School Lunch | | | |
| Program | Program authorized under the Richard B. Russell National School Lunch Act (42 | | | |
| Act of 19 | U.S.C. 1751 et seq), and/or the School Breakfast Program authorized under the Child Nutrition Act of 1966 (42 U.S.C. 1773), are in compliance with Alabama Implementation of USDA Smart Snacks in School and Fundraising Activities for School Year | | | |
| I certify t | I certify that this attestation is true and correct, and therefore, I believe | | | |
| Implemen | [SFA Name] is in compliance with Alabama Implementation of USDA Smart Snacks in School and Fundraising Activities. | | | |
| Fundraisi | In addition, I understand that Alabama Implementation of USDA Smart Snacks in School and Fundraising Activities Form must be completed semi-annually and filed by the following dates: July 1 and January1 of each School Year. | | | |
| Superint | tendent Signature Date | | | |
| | Original, CAID Divertor | | | |
| | Original: CNP Director | | | |

Developed: May 2015