PRICING PROGRAMS ONLY	7 CFR 226.23 (c)(5)(6) & (h)(2)	
Program Requirements	**Met**	**Not Met—See CA**
1. Money collection system has no overt identification of participants receiving free and reduced-price benefits.		
2. Meal counts are by name.		
3. Denied free and reduced-price applicants are not disproportionately composed of minority groups (as observed).		
4. Meal prices are not greater than allowed by regulations (.40L/Su, .30B, .15Sn).		
5. Meals claimed do not include meals brought from home.		
6. The verification process was done appropriately. If not, indicate the problems: ☐ A minimum of three percent of the approved HIS in Category A or B were not selected for verification by the sponsor by November 30 of each year. ☐ Households were not notified in writing of their selection for verification. ☐ The Verification Summary form was not completed annually and maintained on file for three years. ☐ Acceptable documentation of income or categorical eligibility was not received. ☐ Changes to the status of participants selected for verification were not made as a result of verification according to regulatory timelines (Upward adjustments in three days, Downward adjustments in 10 days). ☐ Households were not notified of verification results. ☐ The verification process was not completed and summarized by the sponsor. ☐ The October claim for reimbursement did not reflect the verification results.		
7. **Use only if changes were made to HISs under first section of review form:** Households were notified of their correct category of eligibility and appropriate meal charges applied. (Upward adjustments in three days, Downward adjustments in 10 days). Have sponsor submit written documentation of date of household notifications.		

Verification Procedures for Pricing Programs:

Verification shall be performed on a random sample of no less than three percent of the approved free and reduced-price applications (i.e., HIS approved as Category A or B):

Total number of approved free and reduced-price applications (as of Oct. 31): _____
(one application = one HIS, not number of participants on the HIS)

Minimum number of applications that must be verified (multiply the total number of HIS by .03 and round upward, at least one HIS must be verified by the sponsor): _____

Total number of applications verified by the sponsor: _____

Result	Number of HISs Affected	Number of Participants Affected
No Change in Status		
Category A to Category B		
Category A to Category C		
Category B to Category A		
Category B to Category C		
TOTAL:		

Sponsor ID: