Step 1: Enter Your Login Information

	FOOD FOR SCHOOLS
	Reimbursement Form
	Welcome! Please log in with the username and password provided for your school district. If you need help accessing your login information, please email nfs@massfarmtoschool.org
New Login/Password Username DenaDistrict Password	
	Next

Reimbursement Form Information

Step 2: Confirm your school food authority name & agreement number are correct.

	FOOD FOR SCHOOLS
	Reimbursement Form
Please confirm that the school food authority name young Agreement Number *	u see on this page is correct. School Food Authority * Dena Schools
Is all of the information listed above correct? * ves No	
	Back Next

Step 3: Let us know who is filling out the form. Confirmation of submission will go to the person filling out the form & the School Nutrition Director.

	FOOD FOR SCHOOLS
	Reimbursement Form
Who is filling this out? This information will be used for First Name: * Dena Email Address * dena@massfarmtoschool.org	• confirmation of submission when you finish the form, and for follow up if there are any questions about your submission. Last Name: * Stearns



Example #1: Submitting Claims from a Food Hub/Distributor

You have purchased carrots & apples from Boston Food Hub on September 28, 2023. The carrots cost \$125.43 and came from Smith Farm in Massachusetts. The apples (sliced) cost \$56.98 and came from Meadow Farm in Connecticut.

You may enter both carrots & apples on the same form to get reimbursed for this purchase.*

*Reminder: If you made purchases on two different dates, you will need to use the form twice, once for each date. If you made purchases from two different food hubs, or two different farms, you will need to enter those purchases individually. If you purchased apples & carrots from one farm on the same date, you may enter both apples & carrots on the same form.

Example #1: Submitting Claims from a Food Hub/Distributor



REIMBURSEMENT FORM

Please enter all items by purchase date and vendor only

If you have additional purchases from different vendors or delivery dates, you will be prompted to log them in another submission.

To qualify for reimbursement, food items must be grown, raised, or caught within 400 miles of your SFA.

What is the name of the vendor? * Boston Food Hub eg: Boston Food Hub, or Smith Farm

Is the vendor a farm/producer or food hub/distributor? *

O Farm/Producer

• Food Hub or Distributor

What is the invoice date? *

9/1/2023

MM/DD/YYYY

Delivery Fee, if applicable

25.00

Please enter in the total value. Do not use a dollar sign.

example: 19.00

Enter information for your first item "Carrots."	Please enter all items purchased from this vendor on the date listed above. If you have further purchases from different dates or from a different vendor, you will have an opportunity to make another submission.		
Click "Add Another Item" to enter "Apples."	Farm Name * Smith Farm eg: Smith Farm		
	Farm Location *		
	If "Other", please type in the location of the farm, including town/city , and state . Otherwise, type N/A		
	Item Name * Item Description (optional)		
	Carrots example: apples, carrots, ground beef If the product is minimally processed, please describe, i.e. sliced, chopped, ground.		
	examples: sliced, frozen, shredded		
	How much did it cost? *		
	Please enter in the total value of the item. Do not use a dollar sign.		
	\$ 125.43 example: 100.25		
	Is this a product you would have bought even without the Northeast Food for Schools funds? (optional)		
 Is this a product you would have bought even without the Northeast Food for Schools funds? (optional) Nes 			
	O No		
	Add Another Item		
	Back Next		



Review your submission. If everything looks good, click Submit. If you need to adjust anything, click the green "Back" button. *Do not click the back button on your browser - you will lose all your work!*

Below is the summary of your submission by question category and should be maintained for your records.

You will receive a copy of this summary page via confirmation email.

A final sum total of the reimbursement requests made for this month will be provided to the food service director and business manager at the end of the next month.

Please review for errors prior to submitting.

If you have entered something incorrectly, press the **BACK** button within the form below (not in your browser) to correct the error. Once you click submit, you cannot edit your entry!

Submission Date: 08/14/2023 SFA Name: Dena Schools SFA Agreement Number: 11111

 Purchase Date:
 09/28/2023

 Vendor Name:
 Boston Food Hub

 Farm Name:
 Smith Farm | Meadow Farm

 Farm Location:
 MA | CT

Product(s): Carrots | Apples Cost: 125.43 | 56.98

If you do not have any additional purchases to enter at this time, select Finish Survey, and Submit when prompted.

If you would like to submit more purchases for reimbursement, please select **Submit More Purchases**.

After you click Submit, you will be automatically redirected to the beginning of the form.

O Finish Survey

O Submit More Purchases



Your submission is now complete. You will receive an email confirmation, which will be sent to both the person filling out the form and to the school nutrition director automatically. If you do not receive an email confirmation, please contact nfs@massfarmtoschool.org



Thank you for submitting your purchase!

You will receive a confirmation email shortly.

If you selected Submit More Purchases, you will be redirected to login again.

You may close this window, if you are finished.

Please contact nfs@massfarmtoschool.org, if you have any questions regarding this form, or your reimbursement request.



Example #2: Submitting Claims from a Farm

You have purchased \$75.00 worth of kale from Meadow Farm on September 5, 2023.



- O Yes
- No



Review your submission. If everything looks good, click Submit. If you need to adjust anything, click the green "Back" button. *Do not click the back button on your browser - you will lose all your work!* Below is the summary of your submission by question category and should be maintained for your records.

You will receive a copy of this summary page via confirmation email.

A final sum total of the reimbursement requests made for this month will be provided to the food service director and business manager at the end of the next month.

Please review for errors prior to submitting.

If you have entered something incorrectly, press the **BACK** button within the form below (not in your browser) to correct the error. Once you click submit, you cannot edit your entry!

Submission Date: 08/14/2023 SFA Name: Dena Schools SFA Agreement Number: 11111

 Purchase Date:
 9/5/2023

 Vendor Name:
 Meadow Farm

 Farm Name:
 Meadow Farm

 Farm Location:
 MA

Product(s): Kale Cost: 75.00

If you do not have any additional purchases to enter at this time, select Finish Survey, and Submit when prompted.

If you would like to submit more purchases for reimbursement, please select **Submit More Purchases**.

After you click Submit, you will be automatically redirected to the beginning of the form.

O Finish Survey

O Submit More Purchases

Back	Submit
3%	