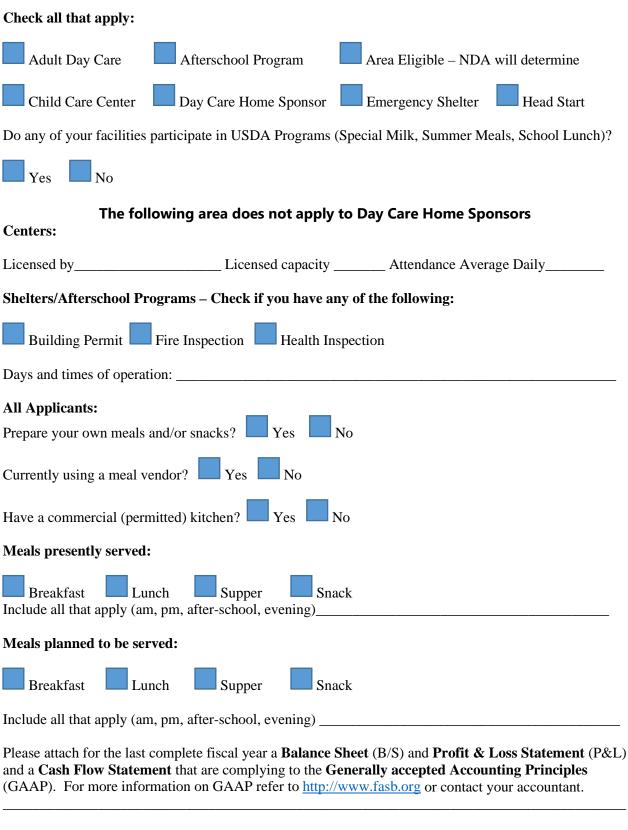
Initial Application Child and Adult Care Food Program (CACFP)



Food and Nutrition Division

Family Day Care Homes, please call 775-337-9121 to participate in the CACFP. *All organizations are required to be in business, in Nevada, for at least one year. Person making the inquiry ______ Title ____ Organization Name Phone Fax# Email How long has your business, in Nevada, been in operation? Secretary of State is Active? (Not applicable to Government Agencies or Tribes) **Select what type of organization:** Government Tribal Non-Profit 501 (c) (3) Religious affiliation under IRS code **Type of For-Profit Entity:** Corporation Partner Sole-Proprietor How much Federal Funds does your organization spend annually? Less than \$750K \$750K and above Record your operating Fiscal Year (ex: July 1 - June 30th or October 1- September 30th, etc.) Name, title, phone, email address of person who prepares financial statements:

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Complete and save this form to your desktop; send as an attachment with the financial documents in an email to: Vickie Guy, vguy@agri.nv.gov.