

SNP Claim For Reimbursement Summary

Browning Public Schools

0400 Status: Active
 DBA: Browning Public Schools
 104 East Boundary St
 Browning, MT 59417-9998

Type of Agency: Educational Institution
 Type of SNP Organization: Public

Confirmation #: CGTOEG

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
May 2026	0	06/10/2026	06/10/2026		Original

Sponsor Totals

Meal Type	Meals/Supplements Served	Federal Rate	Reimbursement Federal Amount
National School Lunch Program			
Free	22,357	4.6200	103,289.34
Reduced	0	4.2200	0.00
Paid	0	0.4600	0.00
Total	22,357		103,289.34
Performance-Based Reimbursement (Lunch)			
Claimed	22,357	0.0900	2,012.13
Adjusted	0	0.0900	0.00
Total	22,357		2,012.13
School Breakfast Program			
Free	475	2.4600	1,168.50
Reduced	0	2.1600	0.00
Paid	0	0.4000	0.00
Total	475		1,168.50
School Breakfast Program Severe Need			
Free	15,180	2.9400	44,629.20
Reduced	0	2.6400	0.00
Paid	0	0.4000	0.00
Total	15,180		44,629.20
Claim Reimbursement Total			151,099.17

Sponsor Claim Reimbursement Totals	
Current Claim Reimbursement Total	151,099.17
Previous Claim Reimbursement Total	0.00
Net Claim Reimbursement Total	151,099.17

[Show Site Meal Details](#)

Child & Adult Care Food Program
Claim For Reimbursement Summary for May 2026

COUNTY OF GLACIER SCHOOL DIST 9/Browning Public Schools-AR

10154 Status: Active
 DBA: Browning Public Schools
 129 1st AVE SE
 Browning, MT 59417

Type of Agency: Indian Tribe
 Agreement Type: Independent Center

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
May 2026	0	06/10/2026	06/10/2026		Original

Confirmation #: DBIHBX

At Risk Snack

Institution Totals	Meals/Snacks	Federal Rate	Reimbursement Amount
Supper			
Free	179	4.6000	823.40
CIL	179	0.3050	54.59
Total	179		877.99
Claim Reimbursement Total			877.99

Institution Claim Reimbursement Totals	Meal Reimbursement	CIL Reimbursement	Totals
Current Claim Reimbursement Total	823.40	54.59	877.99
Previous Claim Reimbursement Total	0.00	0.00	0.00
Net Claim Reimbursement Total	823.40	54.59	877.99

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