

FFV / CNP System Instructions for Sponsor, and Consultant instructions

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Signing on

After the school district is notified of the grant awards received for individual school sites for Fresh Fruits and Vegetable Program (FFVP) each year, the site application must be completed in the CNP program.

(Before you can log in please contact the help desk to get a **user name** and **password** unless you already have one. The help desk will assist sponsors in troubleshooting issues with the CNP System by either answering the questions or directing the sponsor to the Program Consultant.)

- Help Desk Contact 775-687-9144
- FFVP Contact (North) 775-687-9219
- FFVP Contact (South) 702-486-6472
- Financial Contact 775-687-9176

To begin go the CNP web site located at, http://nvcnp.doe.nv.gov/.

1. Click **login**

Child Nutrition Program



- 2. Enter **Username** and **Password**
- 3. Click **Login** once username and password are entered



4. Once logged in select Fresh Fruit and Vegetables

Please choose which one of the following programs you would like to enter.



Change Password

5. Select from menu bar> Maintenance > Change Password

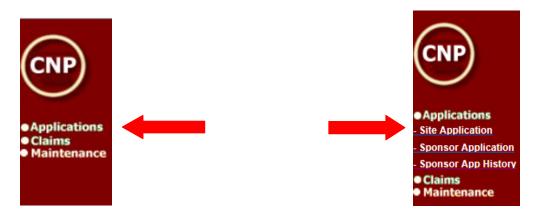
Change Password	
Name:	User Name
Login ID:	USERNAME
Current Password:	
New Password:	
Confirm New Password:	

6. Once password is changed click **Submit**

Submit

Site Application

7. Once logged in Select Applications then Site Application



- 8. Choose Site from list that is being added
- 9. Fill out the necessary information needed

The site application requires:

- 1. Sponsor Application (generated from NSLP)
- 2. Mailing Address

- 3. Physical Address
- 4. Contact information
- 5. Operating Months

Site Application

Fresh Fruit and Vegetable Program

					Sponsor and	d Site Information				
Site Name	е		Sponsor Name		Agreement Number	Jul - Sep Award	Oct - Jun Award	Total Award	School Year	Revision No.
Mark Twain Element	tary School	Ca	rson City School Dis	trict	F-13-09	\$2,415.42	\$28,259.28	\$30,674.70	2010 - 2011	0
					Contact Name	e and Site Location				
Contact	t Name:									
Site Street	t Address:									
Cit	ty:									
Sta	ite:					Zip:				
Cou	nty:						•			
Telep	hone:				()	- E	Ext:		
					Miscellane	ous Questions				
			Location when	e Fruits	and Vegetables	are served (check all	that apply at this	site):		
Lunchroom	School C	Office	Carts / Stands		Vending Machine	Classroom	Hallway	Other		
Days of the week in operation (check days that apply at this site and enter the start and end times):										
		Day	s of the week in op	eration (check days that	apply at this site and	l enter the start an	d end times):		
☐ Monda	ay		s of the week in op om:	eration (check days that	apply at this site and	l enter the start an From:	d end times):	To:	•
Monda Tuesd		Fr							To:	•
- World	lay	Fr Fr	om:	•	To:	•	From:	V		
Tuesd	lay esday	Fr Fr	rom:	\	To:	•	From:	•	To:	•
Tuesd	lay esday day	Fr Fr Fr	rom: [•	To:		From: From:	V V V	To:	V
Tuesd Wedn Thurs	lay esday day	Fr Fr Fr	rom: [• • • • • • • • • • • • • • • • • • •	To: To: To: To:	· · · · · · · · · · · · · · · · · · ·	From: From: From:	Y Y Y	To: To:	•
Tuesd Wedn Thurs Friday	esday day	Fr Fr Fr Fr	rom: [• • • • • • • • • • • • • • • • • • •	To:	· · · · · · · · · · · · · · · · · · ·	From: From: From:	Y Y Y	To: To:	•
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Tuesd Wedn Thurs Friday How	esday day will Fresh Fruit	Fr Fr Fr Fr	om:	v v v v v v v v v v v v v v v v v v v	To: To: To: To: To: To: To: To: To:	mber of Students: planned to serve wee	From: From: From: From: From: Kity:	V V V V V V V V V V V V V V V V V V V	To: To: To: To: vings estimated per	T student:
Tuesd Wedn Thurs Friday How	esday day will Fresh Fruit	Fr Fr Fr Fr	om:	v v v v v v v v v v v v v v v v v v v	To: To: To: To: To: To: To: To: To:	mber of Students: planned to serve wee	From: From: From: From: From: Stite):	V V V V V V V V V V V V V V V V V V V	To: To: To: To: vings estimated per	student:

1. When finished select **Submit**

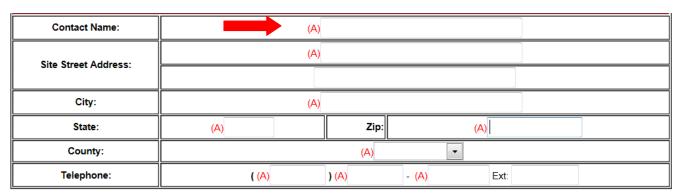


• If there is an error message, errors must be corrected in order to submit application.

Input Errors - You must correct the following errors before the form can be resubmitted for approval. (A) Value is required. Please re-enter. (L) At least one item must be selected. Please re-enter. (M) At least two days must be selected. Please re-enter.

Errors will be indicated by the red letters.

Above box indicates	what erro	r has	occured.



			Mis	scellaneous Qu	estions				
	Location where Fruits and Vegetables are served (check all that apply at this site):								
(L) Lunchroom	School Office	Carts / Stands	☐ Vendin Machine	g Classroor	m	Hallway	Other		
	Days of t	he week in opera	tion (check da	ys that apply a	t this site	and enter t	the start and end	times):	
(M)	Monday	From:	7	Го:	•	From:	•	To:	•
	Tuesday	From:	7	Го:	•	From:	•	To:	•

Sponsor Application

Select> Applications > Sponsor Application

				DUNS	S Numbe	er:					
	Ма	iling Add	Iress			Phy	sical St	eet Addre	ss (No P	O Boxes)	
Address:					Addr	ess:					
City:					City:						
State:		Zip:			State	: :		Zip:			
County:			▼		Cour	nty:		¥			
The st		dress is tondence									
Name: (First, Middle,	Last)					Title:					
Phone:				Ext:		Altern Phone)	-		
Fax:						Email:					
					Claim	Contac	t				
Name: (First, Middle,	Last)					Title:					
Phone:)	_	Ext:		Altern Phone)	-		
Fax:)				Email:					
				Opera	ting Mo	nth Info	ormation	1			
Select eac	h mon	th that tl	ne distri	ct will be	e operat	ing the	Fresh F	ruit and V	egetable	program	
	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar 🗆	Apr	May	Jun

Once information is entered select **Verify** to check for errors. If no errors select **Submit**

Cancel Verify Submit

Sponsor Application History

2. Select Sponsor App History



- 3. Select the year you wish to view
- 4. A list will generat of all Fresh Fruit and Vegetable Sponsor Application's
- 5. Select the one to view

Nothing can be changed Only Viewed.

Enter a Claim

- 6. Sign in Choose Fresh Fruit and Vegetables
- 7. In menu column to the left select **Claims** > **Claim Entry**





- 8. Select **School Year** from the top
- 9. Choose **Monthly Site Claim Month**



10. Choose **School**



Enter the Appropriate Information into each section

- Fruit Expenditures
- Vegetable Expenditures
- Direct Labor Expenditures
- Supplies Expenditures
- Indirect Labor Expenditure

- Travel and Training Expenditure
- Equpment Expenditure
- Donated Supplies, Labor, or Funds

Give a description of the fruits and vegetables served. If fruit and/or vegetables were delivered in cups provide the number of cups per case and cup weight. Under the Number of Units/Cases is where you can put in the number of cups or cases received.

Note: Total Cost is calculated as Number of Units times	Fruit Expenditures Cost per Unit when the Ca	culate or Submit buttons at t	he bottom of the form are u	ısed.
Description	Weight in Ibs	Number of Units / Cases	Cost per Unit / Case	Total Cost
Apples 138 ct.	40.00	2.00	33.34	66.68
Pears 135 ct.	40.00	2.00	24.67	49.34
Oranges 138 ct.	40.00	2.00	26.20	52.40
Bananas	40.00	2.00	26.00	52.00
Black Plums	40.00	2.00	18.67	37.34
Fruit cups 42 ct.	40.00	2.00	76.72	153.44
(Starfruit) 4 slices per cup	0.00	0.00	0.00	0.00
Fruit cups 42 ct.	40.00	2.00	43.68	87.36
(Grapefruit and Black Grapes)	0.00	0.00	0.00	0.00
4 slices of GF and 4 Grapes	0.00	0.00	0.00	0.00
Note: Total Cost is calculated as Number of Units times Co	Vegetable Expenditures st per Unit when the Calcul	ate or Submit buttons at the	bottom of the form are use	d.
Description	Weight in Ibs	Number of Units / Cases	Cost per Unit / Case	Total Cost
Veg Cups 42 ct.	40.00	10.00	42.00	420.00
(2 parsnip coins, 2 yellow	0.00	0.00	0.00	0.00
squash cpons,2 yam sticks)	0.00	0.00	0.00	0.00
Veg Cups 42 ct.	40.00	10.00	39.76	397.60
2 butternut squash chunks	0.00	0.00	0.00	0.00
2 radish coins,2carrot pieces)	0.00	0.00	0.00	0.00

Direct Labor/Adminstrative Costs You will record the cook or subcooks hours and wages.

Direct Labor Expenditures	
Description	Cost
Cook works 1 hr day 3x week	0.00
at 16.09 hr x 3 days for 4 weeks in Oct.	217.86
Total:	217.86

Supplies Expenditures is where you can claim supplies that are continuously restocked i.e., napkins, baggies, food boats, etc.

Supplies Expenditures	
Description	Cost
NAPKINS (\$0.99/PKG) - 1000CT/PKG - 1 PKGS PER MONTH	0.99
BAGS (\$0.0775/each) - 75 BAGS FOR DELIVERY TO CLASSROOMS	5.81
Total:	6.80

Indirect Labor Expenditures includes Administrative Costs, paperwork, admin fees. No actual contact with food; not to be included with Direct Labor.

- Costs are limited to 10 percent of you school's total FFVP Grant. Schools must not exceed this limit.
- Documented expenses you have for planning the Program, managin the paperwork, obtaining the equipment you need, and all other aspects of FFVP that are not related to the preparation and service of fruits and vegetables.
- Purchasing or leasing equipment such as refrigorators, coolers, portable kiosks, carts, and portable food bars (remember to prorate as appropriate).
- Salaries and fringe benefits for emplyees who compile and maintain claims for reimbursment and other financial reports, plan and write menus, order produce, track inventory, and coordinate nutretion promotion activities.

Indirect Labor Expenditure	
Description	Cost
Claim and Order Processing - 7.5 hrs @ \$58.00 (Exceeds 10% Maximum Administrative Costs Allowed by Grant)	424.19
Total:	424.19

Travel/Training Expenditure Record any travel or training incured by program staff.

Travel and Training Expenditure	
Description	Cost
Total:	0.00

Equipment Must be approve by State Agency before finalizing. Include a copy of leased equipment

Equipment Expenditure	
Description	Cost
Cooler Rental	140.00
Total:	140.00

Donated supplies Discribe any item donated, volunteers who assits with programs or funds donated to support the FFVP

donated to support the II vi		
Donated Supplies, Labor, or Funds		
	Description	

Claims **must** be submitted within 60 Days of the claiming month.

Make Sure to <u>Save</u> if submitting takes longer than <u>30</u> minutes, CNP times out and you will lose your work if not <u>Saved</u>.



<u>Calculate</u> Once all information is entered, hit the "Calculate" button at the bottom of the page. Verify that your information matches what is entered into the CNP system.

If there are errors, return to the top of the page and correct any deficiencies.

If everything is properly entered, click the **Submit** button.

Additional schools, Click on "Input another Claim"

Fresh Fruit and Vegetable Site Claim Form



<u>Warning</u>: the 'Save' button does not submit the claim. To create a consolidated claim all site claims must be submitted first.

After completing each school, you are now ready to consolidate your Monthly Claim.

Consolidating claims

In order to consolidate claim your **Monthly Site Claim** must be submitted with no errors, and accepted.

- 11. Select Claim Year
- 12. Select Consolidated Monthly Claim Month

Select a Claim Month					
School Year: 2011 - 2012					
Monthly	Consolidated	Revision Claim	Month to Date		
Site Claim	Monthly Claim	Number	Status	Earned Amount	Amount Paid
<u>Jul 2011</u>	<u>Jul 2011</u>				
Aug 2011	Aug 2011				
Sep 2011	Sep 2011				
Oct 2011	Oct 2011				
Nov 2011	Nov 2011				
Dec 2011	Dec 2011				
Jan 2012	<u>Jan 2012</u>				
Feb 2012	Feb 2012				
Mar 2012	Mar 2012				
	Year-to-Date Totals				

The monthly Consolidated Claim screen will appear with all data fields automatically populated based on the information from the **Monthly Site Claims** that were submitted. These fields **cannot** be accessed or modified from this screen. Review the data for accuracy.

13. Select> Authorized Signer from the Drop down Menu at the top of the Claim Form

• The name in the drop down menu <u>must</u> match the name in the "Created By" at the bottom left on consolidated claim.

Consolidated Monthly Claim Form for Reimbursement Fresh Fruit and Vegetable Program

Monthly Claim Form					
Sponsor Name		Agreement Number		Month Claimed	Revision No.
CARSON CITY SCHO	N-12	1	10/1/2011	0	
Submission Type:	State Employee	Origin	F	Received Date:	12/29/2011
Authorized Signature: Authorized Signature must match Created By					

OCT - JUN Claim Expense Summary				
Operating Costs	Monthly Claim	Prior Month's Claims	OCT - JUN Claim Totals	
Fruits and Vegetables:	82.88	9,371.12	9,454.00	
Direct Labor:	0.00	1,374.03	1,374.03	
Supplies:	0.00	0.00	0.00	
Total Operating Costs:	82.88	10,745.15	10,828.03	
Administrative Costs				
Indirect Labor:	0.00	0.00	0.00	
Travel and Training:	0.00	0.00	0.00	
Equipment:	0.00	0.00	0.00	
Total Administrative Costs:	0.00	0.00	0.00	
Claim Totals				
Total Claim Costs:	82.88	10,745.15	10,828.03	

Historical Summary				
OCT - JUN Award	OCT - JUN Total Claims	OCT - JUN Remaining Award		
55,721.12	10,828.03	44,893.09		

I acknowledge that I am the school food authority responsible for reviewing and analyzing the Fresh Fruit and Vegetable Program Grant claim to ensure accuracy as specified in the grant assurances, Fresh Fruit and Vegetable Handbook and policy memorandums. I acknowledge that failure to submit accurate claims will result in the recovery of an over claim and may result in the withholding of payments, suspension or termination of the program grant. I acknowledge that failure to submit accurate claims may reflect embezzlement, willful misapplication of funds, theft or fraudulent activity, and all applicable penalties shall apply.

I have read the instructions for filing the claim and am aware that if the claim is not submitted by the claim deadline the claim may not be paid.

Created Date: 3/20/2012 1:19:58 PM

1

Created By:

Note: Please review this information before submitting this claim.

Modified By:

Modified Date:

Click the Submit button to enter this claim.



Historical Summary

Oct-Jun Award – Total amount of granted awarded to the individual school from October thru June, Funds awarded July thru August funds show separately under Total Fiscal Year Award which are available only during those 3 months.

Oct-Jun Total Claims – The amount reimbursed by claims submitted to-date during the October through June timeframe.

Oct-Jun Remaining Award – Remaining funds available prior to hitting the Submit button. Once the claim been submitted the Oct-Jun Award along with the Oct-Jun Remaining Award will automatically adjust to the correct amounts.

14. Once the funds have been calculated then you SUBMIT your claim. At this point you will no longer be able to access the claim submitted unless it was rejected. If the claim is rejected you will receive an email explaining why it was rejected. Once you receive the email you can go into the Claim section and make corrections. Then you **must** consolidate again.