

**CHILD AND ADULT CARE FOOD PROGRAM
SAMPLE PUBLIC RELEASE STATEMENT**

It is required that each institution/organization make available to the local media a public release announcing the availability of free meals and that such meals are available to all in attendance without regard to race, color, age, national origin, sex or disability. Please submit to media the sample statement below. You are **not required to pay** for a public service announcement. The media (i.e., newspapers, magazines, and radio and television stations serving the area) often provide a portion of free space for public service announcements. Whether or not the media uses the public release, your responsibility has been fulfilled when the release is sent to the media. You must submit a copy of this documentation of your efforts to the CYFD/Family Nutrition Bureau.

The _____ aaaaaaaa _____ announces the sponsorship of the Child and Adult Care Food Program
(*Name of institution/organization*)

All participants in attendance will be offered the same meals with no physical segregation of, or other discriminatory action against any person, *Non-Discrimination Statement*: This explains what to do if you believe you have been treated unfairly. ““In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal and, where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136

STANDARDS FOR DETERMINING ELIGIBILITY
(EFFECTIVE FROM JULY 1, 2013 TO JUNE 30, 2014)

Household Size	FREE			REDUCED		
	Year	Month	Week	Year	Month	Week
1	14,937	1,245	288	21,257	1,772	409
2	20,163	1,681	388	28,694	2,392	552
3	25,389	2,116	489	36,131	3,011	680
4	30,615	2,552	589	43,568	3,631	838
5	35,841	2,987	690	51,005	4,251	981
6	41,067	3,423	790	58,442	4,871	1,124
7	46,293	3,858	891	65,879	5,490	1,267
8	51,519	4,294	991	73,316	6,110	1,410
For Each Additional Family Member	+5,226	+436	+101	+7,437	+620	+144

Meals will be provided at: (*List center's name and addresses of all sites.*)

Media submitted to:

Date of submission:
