Ohio Child and Adult Care Food Program ANNUAL INVENTORY REQUIREMENTS

CACFP sponsors, who prepare any meals or snacks, are required to only record an **ANNUAL INVENTORY** and determine its monetary value. Sponsors that vend <u>all</u> meals and snacks are not required to keep inventory records.

An annual inventory is an itemized listing of unopened food and non-food supplies that are on hand at the end of the fiscal year (September 30). Inventory represents money in the form of previously purchased food and non-food supplies. The dollar value of inventoried items must be included in the determination of the food and non-food costs incurred at the end (September 30) and beginning (October 1) of the fiscal year. When annual inventory procedures are followed, the actual cost of food and non-food supplies used in the fiscal year can be determined.

ANNUAL INVENTORY: To complete annual inventory requirements, an actual count of food and food related non-food items left on hand is only taken at the end of each fiscal year, September 30. Attached are the required annual inventory and monthly food/non-food cost worksheets. Please copy these forms as needed. The following chart summarizes annual inventory procedures.

CLAIM MONTH	INVENTORY	CALCULATION
September	Record ending fiscal year food and non-food inventory on September 30	DEDUCT inventory values from September food and non-food purchases and document using the Ending Fiscal Year Food/Non-Food Costs Worksheet. Report total September costs online on the Sponsor Claim Form
October	Ending food and non-food inventory values for September automatically become the beginning inventory values for new fiscal year starting October	ADD September ending inventory values to October food and non-food purchases and document using the Beginning Fiscal Year Food/Non-Food Costs Worksheet. Report total October costs online on the Sponsor Claim Form

OHIO CACFP - FOOD INVENTORY RECORD - FORM 1

For required ANNUAL	red ANNUAL inventory: Record inventory September 30 th each year using Make additional copies as needed.		Date Inventory Recorded:	
uns ioini. Wake addiid	orial copies as freeded.		Month/Da	y/Year
(A) ITEM	(B) SIZE AND DESCRIPTION (can, bag, case, lb.)	(C) NO. ON HAND	X (D) UNIT COST	= (E) TOTAL COST
Example				
Green Beans	1lb. can, French Style	6	.89	\$5.34
Example				
Cheerios cereal	16 oz. box	5	2.69	\$13.45
		TOTAL	OOD (F-1) =	•

OHIO CACFP - NON-FOOD INVENTORY RECORD - FORM 2

For required ANNUAL ir	nventory: Record inventory September 30 th each year using		Date Inventory Recorded:		
this form. Make additiona	al copies as needed.	,	 Month/Day	//Year	
(A) ITEM	(B) SIZE AND DESCRIPTION (can, bag, case, lb.)	(C) NO. ON HAND	X (D) UNIT COST	= (E) TOTAL COST	
Example:					
Paper Cups	Solo 8 oz. cups – sleeve(30ct)	6	1.79	\$10.74	
Example: Dawn dish detergent	12 oz. bottle	2	1.99	\$3.98	
		TOTAL F	OOD (F-2) =	\$	

Ending Fiscal Year Food/Non-Food Cost Worksheet

ANNUAL Inventory: Use this form to record September food and non-food purchases then minus September ending inventory.

OHIO CACFP	FOOD/NON-FOOD COSTS FOR MONTH: SEPTEMBER YR:			Number gallons of milk	
Date	List Purchases	FOOD RECEIPT TOTALS	NON-FOOD RECEIPT TOTALS	purchased on receipt	
9-4-13	EXAMPLE – KROGERS	\$205.95	\$69.75	5	
		+\$	+\$		
		+\$	+\$		
		+\$	+\$		
		+\$	+\$		
		+\$	+\$		
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		+\$	+\$		
TOTAL SEPT	EMBER MONTHLY RECEIPTS	= \$*	= \$**	TOTAL GALLONS	
	NG INVENTORY TOTALS ON SEPTEMBER 30	- \$(F-1)	- \$(F-2)		
	ST CLAIMED FOR SEPTEMBER	= \$*	= \$**		

^{*} Report total food costs on the September online sponsor claim: Operational Costs, Line Item – Food List cost in applicable Column: CACFP Funded Cost or Non-CACFP Funded Cost.

Note: If ending food or non-food cost results in a negative number, zero cost would be claimed for month.

^{**} Report total non-food costs on the September online sponsor claim: Operational Costs, Line Item – Non Food List cost in applicable Column: CACFP Funded Cost or Non-CACFP Funded Cost.

Beginning Fiscal Year Food/Non-Food Cost Worksheet

For ANNUAL Inventory: Complete this form at the end of October. Add September ending food and non-food inventory values to October purchases.

OHIO CACFP	FOOD/NON FOOD COSTS FOR MONTH: OCTOBER YR:	BEGINNING INVENTORY List Total FOOD inventory (F-1) from September 30 \$	BEGINNING INVENTORY List Total NON-FOOD inventory (F-2) from September 30 \$	Number gallons of milk purchased on receipt
Date	List Purchases	+ FOOD RECEIPT TOTALS	+ NON-FOOD RECEIPT TOTALS	
10-19-13	EXAMPLE – Sack N Save	\$312.76	\$44.35	5
		+\$	+\$	
		+\$	+\$	
		+\$	+\$	
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		+\$	+\$	
TOP PLUS A	INVENTORY VALUES LISTED AT LLL MONTHLY RECEIPTS EQUAL IST FOR OCTOBER	=\$*	=\$**	Total Gallons

^{*} Report total food costs on the October online sponsor claim: Operational Costs, Line Item- Food List cost in applicable Column: CACFP Funded Cost or Non-CACFP Funded Cost.

Note: If ending food or non-food cost results in a negative number, zero cost would be claimed for month.

^{**} Report total non-food costs on the October online sponsor claim, Operational Costs, Line Item – Non Food List cost in applicable Column: CACFP Funded Cost or Non-CACFP Funded Cost.