

CACFP MONTHLY EXPENSE WORKSHEET

Sponsoring Organization _____

Site _____

Month/Year _____

LABOR EXPENSES				Benefits	
A	B	C	D	E	F
POSITION	TOTAL FOOD SERVICE HOURS PER MONTH (FROM TIME DISTRIBUTION REPORT)	SALARY PER HOUR	GROSS PAY (B X C)	PERCENT OF TIME SPENT ON CACFP TASKS THIS MONTH TOTAL B ÷ MONTHLY HOURS	CACFP PORTION OF BENEFITS TOTAL BENEFITS PAID TO EMPLOYEE E X

TOTAL: _____
SALARIES **BENEFITS**

FACILITY EXPENSES
 SQUARE FOOTAGE OF CACFP FOOD SERVICE AREA ÷ TOTAL SQUARE FOOTAGE OF FACILITY = PERCENT ATTRIBUTED
 _____ ÷ _____ = _____
 (KITCHEN, FOOD STORAGE, EATING AREA) (ENTIRE FACILITY) (COLUMN C)

A	B	C	D
SERVICE	BILLED AMOUNT	PERCENT ATTRIBUTED TO CACFP	TOTAL (B x C)
COMMUNICATION AND UTILITIES			
RENT OR MORTGAGE			
CONTRACTED SERVICES			

i: stu_svcs/CACFP/Forms/CACFP Expense Worksheet