



**STATE OF TENNESSEE  
DEPARTMENT OF HUMAN SERVICES**  
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**RAQUEL HATTER, MSW, Ed.D.**  
COMMISSIONER

**MEMORANDUM**

**TO:** Child and Adult Care Food Program (CACFP) Institutions  
**FROM:** Leslie Schenk, Director of Community Services  
**DATE:** June 3, 2014  
**SUBJECT:** Notice of closure and release of records

All CACFP participants:

If for some reason your center should have to close, please make sure that you notify DHS within 30 days of the last operating day. At that time, DHS will inform you that DHS will need to obtain copies of all records pertaining to CACFP reimbursements for the previous three fiscal years plus the current fiscal year. This would include individual eligibility applications, attendance records, meal counts, receipts, etc. Please review the attached federal regulation. Once you notify DHS of closure, arrangements will be made to obtain the records.

Thank you for all you do to bridge the hunger gap in Tennessee

Agreement number, signature and date below will confirm staff review and compliance with this regulation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Agreement Number

LS/am

Attachment