

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2301001

Adrian SD 61
Business Manager
P.O. Box 108
Adrian, OR 97901

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,650.22

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0201001

Alsea SD 7J
Business Manager
PO Box B
Alsea, OR 97324

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$647.03

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3601002

Amity SD 4J
Business Manager
807 S Trade St
Amity, OR 97101

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,565.27

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2301002

Annex SD 29
Business Manager
402 Annex Road
Ontario, OR 97914

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$570.75

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1101001

Arlington SD
Business Manager
P.O. Box 10
Arlington, OR 97812

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$859.49

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1501002

Ashland SD 5
Business Manager
885 Siskiyou Blvd.
Ashland, OR 97520

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
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- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$5,822.59

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0401002

Astoria SD
Business Manager
785 Alameda Avenue
Astoria, OR 97103

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
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- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$5,854.04

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3001001

Athena-Weston SD 29J
Business Manager
375 S. Fifth St.
Athena, OR 97813

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
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- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,638.07

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0102001

Baker SD 5J
Business Manager
2090 4th St.
Baker City, OR 97814

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$4,841.05

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0602001

Bandon SD 54
Business Manager
455 9th Street SW
Bandon, OR 97411

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,255.10

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3402001

Banks SD
Business Manager
12950 NW Main Street
Banks, OR 97106

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,868.23

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3402002

Beaverton SD 48J
Business Manager
10740 NE Walker Road Suite
1400 Hillsboro, OR 97006

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$124,744.42

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0902001

Bend/LaPine SD
Business Manager
520 NW Wall Street
Bend, OR 97703

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
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- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$56,068.93

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2002002

Bethel SD 52
Business Manager
4640 Barger Drive
Eugene, OR 97402

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$25,028.01

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2002003

Blachly SD 90
Business Manager
20264 Blachly Grange Rd
Blachly, OR 97412

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
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- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$800.91

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0802001

Brookings-Harbor SD 17
Business Manager
564 Fern Ave.
Brookings, OR 97415

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$6,098.14

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0102002

Burnt River SD
Business Manager
PO Box 9
Unity, OR 97884

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$188.87

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1502001

Butte Falls SD 91
Business Manager
P.O. Box 228
Butte Falls, OR 97522

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$933.27

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1003001

Camas Valley SD 21J
Business Manager
PO Box 57
Camas Valley, OR 97416

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
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- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$909.68

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0303003

Canby SD 86
Business Manager
1130 S Ivy St
Canby, OR 97013

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
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- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$13,940.07

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2403005

Cascade SD 005
Business Manager
10226 Marion Rd SE
Turner, OR 97392

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

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- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$9,078.68

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2603006

Centennial SD 28J
Business Manager
3424 SE 174th
Portland, OR 97236-1235

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

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- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$27,474.34

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0803001

Central Curry SD 1
Business Manager
29516 Ellensburg Ave.
Gold Beach, OR 97444

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

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- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,218.61

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2203003

Central Linn SD 552
Business Manager
PO Box 200
Halsey, OR 97348

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,279.22

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2703001

Central SD 13J
Business Manager
750 S Fifth St.
Independence, OR 97351

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

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- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$12,102.96

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0503001

Clatskanie SD 6J
Business Manager
PO Box 678
Clatskanie, OR 97016

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,226.75

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0303007

Colton SD
Business Manager
30429 S. Grays Hill Road
Colton, OR 97017

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,599.98

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1103001

Condon SD 25J
Business Manager
210 E.Bayard
Condon, OR 97823

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$640.11

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0603004

Coos Bay SD 009
Business Manager
1255 Hemlock Ave.
Coos Bay, OR 97420

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$14,027.42

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0603005

Coquille SD
Business Manager
1366 N. Gould St.
Coquille, OR 97423

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$5,443.49

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2603013

Corbett SD 39
Business Manager
35800 E Historic Columbia River
Highway Corbett, OR 97019

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,196.95

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0203003

Corvallis SD 509J
Business Manager
1555 SW 35th St.
Corvallis, OR 97333

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$15,778.55

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3103003

Cove SD 15
Business Manager
PO Box 68
Cove, OR 97824

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$859.91

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1303001

Crane Elem SD #4
Business Manager
43277 Crane-Venator Ln
Crane, OR 97732

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$570.75

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1303002

Crane Union High School
Business Manager
43277 Crane-Venator Ln
Crane, OR 97732

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$400.52

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2003008

Creswell SD 40
Business Manager
998 A Street
Creswell, OR 97426

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$4,707.98

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0703001

Crook Co SD
Business Manager
471 NE Ochoco Plaza Dr.
Prineville, OR 97754-8467

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$10,259.44

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2003009

Crow-Applegate-Lorane SD 66
Business Manager
85955 Territorial Road
Eugene, OR 97402

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$828.13

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1603003

Culver SD
Business Manager
P. O. Box 259
Culver, OR 97734

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,732.81

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2704001

Dallas SD
Business Manager
111 SW Ash St
Dallas, OR 97338

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$9,331.49

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2604001

David Douglas SD 40
Business Manager
2900 SE 122nd
Portland, OR 97236

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$49,563.86

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1004001

Days Creek SD 15
Business Manager
PO Box 10
Days Creek, OR 97429

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$920.56

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3604001

Dayton SD 008
Business Manager
P.O. Box 219
Dayton, OR 97114-0219

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$5,700.25

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1204001

Dayville SD 16J
Business Manager
P.O. Box C
Dayville, OR 97825

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$244.71

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3304001

Dufur SD 29
Business Manager
802 NE 5th Street
Dufur, OR 97021

**National School Lunch Program
State Revenue Matching
SY 2021-21**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,951.58

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1805001

Eagle Ridge High School
Business Manager
677 South 7th Street
Klamath Falls, OR 97601

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$402.41

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3005001

Echo SD 5
Business Manager
600 Gerone Street
ECHO, OR 97826

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,315.71

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3105002

Elgin SD 23
Business Manager
PO Box 68
Elgin, OR 97827

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,828.87

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1005001

Elkton SD 34
Business Manager
PO Box 390
Elkton, OR 97436

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,077.88

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3205001

Enterprise SD 21
Business Manager
201 S.E. 4th
Enterprise, OR 97828

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,473.93

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0305002

Estacada SD
Business Manager
255 NE 6th Avenue
Estacada, OR 97023

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$6,280.84

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2005005

Eugene SD 4J
Business Manager
200 N MONROE
EUGENE, OR 97402

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$48,059.19

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2706001

Falls City SD 57
Business Manager
111 N Main Street
Falls City, OR 97344

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$986.24

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2006003

Fern Ridge SD 28J
Business Manager
88834 Territorial Rd
Elmira, OR 97437

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$5,393.57

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3406001

Forest Grove SD 15
Business Manager
1728 Main St
Forest Grove, OR 97116

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$24,264.35

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3506001

Fossil SD 21J
Business Manager
PO Box 287
Fossil, OR 97830-0287

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$278.47

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3407001

Gaston SD 511J
Business Manager
300 Park St
Gaston, OR 97119

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,686.62

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2407001

Gervais SD
Business Manager
PO Box 100
Gervais, OR 97026

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$6,429.68

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Gladstone SD 115
Business Manager
17789 Webster Rd
Gladstone, OR 97027

Agreement: 0307001

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$7,183.03

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1007001

Glendale SD 77
Business Manager
PO Box E
Glendale, OR 97442

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,574.55

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1007002

Glide SD 12
Business Manager
301 Glide Loop Drive
Glide, OR 97443

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,768.64

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1707001

Grants Pass SD
Business Manager
725 Dean Street
Grants Pass, OR 97526

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$32,637.80

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2207001

Greater Albany SD 8J
Business Manager
3610 Grand Prairie Rd SE
Albany, OR 97322

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$33,196.77

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2607003

Gresham-Barlow SD 10J
Business Manager
1331 NW Eastman Pkwy
Gresham, OR 97030

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$40,442.52

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1308001

Harney Co SD 3
Business Manager
550 N. Court
Burns, OR 97720

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,346.69

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2308001

Harper SD 66
Business Manager
2987 Harper/Westfall Rd
Harper, OR 97906

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$566.79

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2208001

Harrisburg SD
Business Manager
PO Box 208
Harrisburg, OR 97446

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,927.23

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3008005

Hermiston SD 8
Business Manager
305 SW 11th St
Hermiston, OR 97838

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$26,958.92

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3408001

Hillsboro SD 1J
Business Manager
3083 NE 49th Place #208
Hillsboro, OR 97124

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$81,221.25

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1408001

Hood River SD
Business Manager
1011 Eugene Street
Hood River, OR 97031

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$16,470.54

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0108001

Huntington SD
Business Manager
520 Third Street E
Huntington, OR 97907

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$516.78

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3109001

Imbler SD 11
Business Manager
PO Box 164
Imbler, OR 97841

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,252.66

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2509001

Ione SD R2
Business Manager
P.O. Box 167
Ione, OR 97843

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$713.99

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1503002

Jackson County SD #6 - Central Point
Business Manager
300 Ash Street
Central Point, OR 97502

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$21,693.61

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1505001

Jackson County SD #9 - Eagle Point
Business Manager
P.O. Box 548
Eagle Point, OR 97524

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$20,263.24

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1610001

Jefferson Co SD 509
Business Manager
445 SE Buff Street
Madras, OR 97741

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$17,635.30

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2410001

Jefferson SD 14J
Business Manager
1328 N 2nd St
Jefferson, OR 97352

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,595.87

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1207001

John Day SD 3
Business Manager
401 N. Canyon City Blvd.
Canyon City, OR 97820

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,479.62

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3210001

Joseph SD 6
Business Manager
POB 787
Joseph, OR 97846

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$887.83

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2010001

Junction City SD 69
Business Manager
325 Maple St.
Junction City, OR 97448

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$4,803.52

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1811002

Klamath Co SD
Business Manager
2845 Greensprings DR
Klamath Falls, OR 97601

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$33,701.36

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1811005

Klamath Falls SD
Business Manager
2695 Foothills Blvd
Klamath Falls, OR 97603

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$13,537.80

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0411001

Knappa SD 4
Business Manager
41535 Old Hwy 30
Astoria, OR 97103

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,329.27

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3112001

LaGrande SD
Business Manager
1305 North Willow Street
La Grande, OR 97850

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$9,507.50

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0312001

Lake Oswego SD 7J
Business Manager
2501 Country Club Road Lake
Oswego, OR 97034-0070

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$13,667.43

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1912001

Lakeview SD
Business Manager
1341 South 1st Street
Lakeview, OR 97630

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,141.95

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2012007

Lane ESD
Business Manager
1200 Hwy 99 N
Eugene, OR 97402

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$480.81

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2212001

Lebanon Community SD 9
Business Manager
485 S. 5th St.
Lebanon, OR 97355

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$15,996.84

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2112001

Lincoln Co SD
Business Manager
PO Box 1110
Newport, OR 97365

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$24,777.93

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1212001

Long Creek SD 17
Business Manager
PO Box 429
Long Creek, OR 97856-0429

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$201.86

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2012005

Lowell SD 71
Business Manager
65 S Pioneer
Lowell, OR 97452

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,350.18

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2013001

Mapleton SD 32
Business Manager
10868 E Mapleton Rd
Mapleton, OR 97453

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$866.64

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2013002

Marcola SD 79J
Business Manager
38300 Wendling Rd.
Marcola, OR 97454

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$837.92

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2013003

McKenzie SD 68
Business Manager
51187 Blue River Dr.
Vida, OR 97488

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,023.68

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3613001

McMinnville SD 40
Business Manager
800 NE Lafayette Ave.
McMinnville, OR 97128

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$24,446.53

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1513001

Medford SD 549
Business Manager
815 S. Oakdale Avenue, Annex E
Medford, OR 97501-3531

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$55,586.81

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3013001

Milton-Freewater SD 7
Business Manager
1020 S Mill Street
Milton-Freewater, OR 97862

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$10,583.78

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3513001

Mitchell SD 55
Business Manager
P.O. Box 247
Mitchell, OR 97750

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$253.38

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0313001

Molalla River SD 35
Business Manager
PO Box 188
Molalla, OR 97038

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$7,990.54

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0213001

Monroe SD
Business Manager
365 North 5th Street
Monroe, OR 97456

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,351.36

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1213001

Monument SD 8
Business Manager
P.O. Box 127
Monument, OR 97864

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$249.33

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2513001

Morrow Co SD
Business Manager
P.O. Box 100
Heppner, OR 97836

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$11,051.02

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2413003

Mt. Angel SD 91
Business Manager
PO Box 1129
Mount Angel, OR 97362

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,770.61

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2613008

Multnomah ESD
Business Manager
PO Box 301039
Portland, OR 97294

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,419.15

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0613002

Myrtle Point SD 41
Business Manager
413 C St
Myrtle Point, OR 97458

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,016.23

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3614001

Newberg SD 29J
Business Manager
714 E Sixth Street
Newberg, OR 97132-3406

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$17,344.15

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0614001

North Bend SD 13
Business Manager
1913 Meade Street
North Bend, OR 97459

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$8,159.53

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0314001

North Clackamas SD 12
Business Manager
12400 SE Freeman Way
Milwaukie, OR 97222-4799

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$54,446.26

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1014001

North Douglas SD 22
Business Manager
PO Box 338
Drain, OR 97435

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,513.10

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1914001

North Lake SD 14
Business Manager
57566 Fort Rock Rd.
Silver Lake, OR 97638

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,096.05

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2414002

North Marion SD 15
Business Manager
20256 Grim Rd NE
Aurora, OR 97002

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$9,063.37

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3114001

North Powder SD 8J
Business Manager
PO Box 10
North Powder, OR 97867

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,207.60

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2414003

North Santiam SD 29
Business Manager
1155 N. 3rd Ave
Stayton, OR 97383

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$9,397.18

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3314003

North Wasco Co. SD
Business Manager
3632 W. 10th Street
The Dalles, OR 97058

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$12,589.75

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3414001

NW Regional ESD
Business Manager
5825 NE Ray Circle
Hillsboro, OR 97124

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,195.68

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2314001

Nyssa SD 26
Business Manager
804 Adrian Blvd.
Nyssa, OR 97913

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$6,419.18

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1015001

Oakland SD
Business Manager
PO Box 390
Oakland, OR 97462

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,916.41

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2015001

Oakridge SD 76
Business Manager
76499 Rose Street
Oakridge, OR 97463

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,778.86

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2315001

Ontario SD
Business Manager
195 S.W. 3rd Ave
Ontario, OR 97914

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$17,653.52

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0315002

Oregon City SD 62
Business Manager
PO Box 2110
Oregon City, OR 97045

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$21,548.02

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2415003

Oregon School for the Deaf
Business Manager
999 Locust St. NE
Salem, OR 97301

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$637.04

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0315003

Oregon Trail SD 46
Business Manager
P.O. Box 547
Sandy, OR 97055

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$14,828.51

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2616002

Parkrose SD 3
Business Manager
10636 NE Prescott St
Portland, OR 97220

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$13,925.47

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3016001

Pendleton SD 16
Business Manager
107 NW 10th street
Pendleton, OR 97801

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$11,819.54

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2716001

Perrydale SD 21
Business Manager
7445 Perrydale Rd
Amity, OR 97101

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$858.07

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0216001

Philomath SD 17J
Business Manager
1620 Applegate St
Philomath, OR 97370

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2020-21 is:

\$3,692.21

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1516001

Phoenix-Talent SD
Business Manager
PO Box 698
Phoenix, OR 97535

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$11,487.10

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3016002

Pilot Rock SD 2
Business Manager
PO Box BB
Pilot Rock, OR 97868

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,493.00

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0116001

Pine-Eagle Charter School
Business Manager
375 N. Main Street
Halfway, OR 97834

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$936.57

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of
Education 255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2016002

Pleasant Hill SD 1
Business Manager
36386 Highway 58
Pleasant Hill, OR 97455

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,295.03

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0816001

Port Orford-Langlois SD
Business Manager
P.O. Box 8
Port Orford, OR 97465

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,157.60

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2616011

Portland SD
Business Manager
501 N. Dixon
Portland, OR 97227

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$142,202.34

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1216001

Prairie City SD 4
Business Manager
P.O. Box 345
Prairie City, OR 97869

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$686.06

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1516002

Prospect SD 59
Business Manager
P.O. Box 40
Prospect, OR 97536

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,093.89

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0518001

Rainier SD 13
Business Manager
28168 Old Rainier Road
Rainier, OR 97048

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,407.33

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0918002

Redmond SD 2J
Business Manager
145 SE Salmon
Redmond, OR 97756

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$20,870.86

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1018001

Reedsport SD 105
Business Manager
100 Ranch Road
Reedsport, OR 97467

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,026.45

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2618002

Reynolds SD 7
Business Manager
1204 NE 201st Ave
Fairview, OR 97024

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$50,852.46

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1018002

Riddle SD 70
Business Manager
PO Box 45
Riddle, OR 97469

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,807.68

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1518001

Rogue River SD 35
Business Manager
PO Box 1045
Rogue River, OR 97537

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,660.71

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1018004

Roseburg SD 4
Business Manager
1419 NW Valley View Drive
Roseburg, OR 97471

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$23,926.12

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2419004

Salem/Keizer SD 24J
Business Manager
2450 Lancaster Dr. NE
Salem, OR 97305

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$181,445.27

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2219001

Santiam Canyon SD 129
Business Manager
PO Box 197
Mill City, OR 97360

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,642.55

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0519001

Scappoose SD
Business Manager
33589 SE High School Way
Scappoose, OR 97056

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$5,893.17

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2219002

Scio SD 95
Business Manager
38875 N.W. 1st Ave.
Scio, OR 97374

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,213.91

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3619001

Sheridan SD 48J
Business Manager
435 S Bridge Street
Sheridan, OR 97378

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,956.80

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2819001

Sherman Co SD
Business Manager
65912 High School Loop
Moro, OR 97039

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,266.74

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3419001

Sherwood SD 88J
Business Manager
16155 SW Sunset Blvd
Sherwood, OR 97140

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$10,663.92

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2419006

Silver Falls SD 4
Business Manager
612 Schlador Street
Silverton, OR 97381

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$8,787.21

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0919001

Sisters SD 6
Business Manager
525 E. Cascade Ave.
Sisters, OR 97759

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,714.03

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2019002

Siuslaw SD 97J
Business Manager
2111 Oak St
Florence, OR 97439

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$5,481.67

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2019006

South Lane SD 45J
Business Manager
P.O. Box 218
Cottage Grove, OR 97424

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$11,650.26

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1019001

South Umpqua SD 19
Business Manager
558 SW Chadwick Lane
Myrtle Creek, OR 97457

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$6,777.52

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3319001

South Wasco Co SD
Business Manager
P.O. Box 346
Maupin, OR 97037

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$1,096.81

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3519001

Spray SD
Business Manager
PO Box 230
Spray, OR 97874

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$379.05

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2019007

Springfield SD 19
Business Manager
640 A Street
Springfield, OR 97477

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$40,529.54

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0519003

St. Helens SD 502
Business Manager
474 N 16th St.
St. Helens, OR 97051

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$8,967.46

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2419011

St. Paul SD 45
Business Manager
20449 Main St. NE
St. Paul, OR 97137

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$711.77

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3019001

Stanfield SD 61
Business Manager
1120 North Main
Stanfield, OR 97875

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,161.26

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1019003

Sutherlin SD 130
Business Manager
531 E Central
Sutherlin, OR 97479

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$5,943.13

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2219004

Sweet Home SD 55
Business Manager
1641 Long Street
Sweet Home, OR 97386

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$10,155.19

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1720001

Three Rivers SD
Business Manager
126 Ringuette Street
Grants Pass, OR 97527

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$21,004.49

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3420001

Tigard-Tualatin SD 23J
Business Manager
6960 SW Sandburg Street
Tigard, OR 97223

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$36,467.13

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2920002

Tillamook SD
Business Manager
2510 1st Street
Tillamook, OR 97141

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$8,595.80

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3021002

Umatilla SD 6
Business Manager
1001 6th Street
Umatilla, OR 97882

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$8,749.35

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3121001

Union SD 5
Business Manager
PO Box 908
Union, OR 97883

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$995.24

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2322001

Vale SD 84
Business Manager
403 E Street West
Vale, OR 97918

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$4,653.17

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0522001

Vernonia SD 47J
Business Manager
1201 Texas Ave
Vernonia, OR 97064

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$2,087.81

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3223001

Wallowa SD 12
Business Manager
PO Box 425
Wallowa, OR 97885

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$723.12

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0423001

Warrenton-Hammond SD 30
Business Manager
820 SW Cedar Avenue
Warrenton, OR 97146

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$4,052.29

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 0323001

West Linn SD
Business Manager
2755 SW Borland Rd
Tualatin, OR 97062

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$20,335.09

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3623002

Willamina SD 30J
Business Manager
PO Box 1000
Willamina, OR 97396

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$4,460.07

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1023001

Winston-Dillard SD 116
Business Manager
620 NW Elwood
Winston, OR 97496

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$4,921.80

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 2423006

Woodburn SD 103
Business Manager
1390 Meridian Dr
Woodburn, OR 97071

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$35,741.97

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 3625001

Yamhill-Carlton SD
Business Manager
120 N. Larch Place
Yamhill, OR 97148

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$3,000.17

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____

Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310

Child Nutrition Programs

Agreement: 1025001

Yoncalla SD 32
Business Manager
P. O. Box 568
Yoncalla, OR 97499

**National School Lunch Program
State Revenue Matching
SY 2021-22**

Instructions:

- Complete the information requested for the state match transfer
- Sign and date form
- Provide copy of documentation for moving funds from General Fund to the Non-Profit School Food Service fund. **Documentation needs to show exact amount of required State Match. This may require an additional journal entry marked "State Match Requirement"**
- Return to: ode.schoolnutrition@ode.state.or.us Subject: State Match
- Retain a copy for your records

The amount of state appropriated general purpose or undesignated revenues your district must transfer to the Non-Profit School Food Service fund in order to meet the general cash assistance match for 2021-22 is:

\$882.28

The required match was made by:

Fund Transfer from General Fund to Food Services Fund:

Date _____ Amount _____

Signature: _____ Date: _____

Printed Name: _____

Title: _____ Phone: _____

Email Address: _____