Sponsor Name and/or Logo

Street Address

City, State, Zip

Phone

Email

Date

Provider Name

Street Address

City, State, Zip

Email Address

VIA: Select Method of Notice Delivery

Dear Provider Name,

This letter concerns the Date [date of the Serious Deficiency Notice] Notice that you are seriously deficient in your operation of the Child and Adult Care Food Program (CACFP). On Date [date when sufficient corrective actions were received from the provider]***,***we received the documentation you sent us detailing the actions you have taken to correct these serious deficiency(ies).

**SERIOUS DEFICIENCY DETERMINATION TEMPORARILY DEFERRED**

Based on our review of the documentation, we have determined that you have fully and permanently corrected the serious deficiency(ies). As a result, we have temporarily deferred our serious deficiency determination as of the date of this letter. This also means that we will not propose to terminate your agreement for cause based on this serious deficiency finding(s) or disqualify you.

**SUMMARY**

We have temporarily deferred our serious deficiency determination. We may conduct an unannounced review to determine the adequacy of your corrective action(s). If we find on the follow-up review or, in any subsequent review, that the serious deficiency(ies) has/have not been fully and permanently corrected, we will immediately propose to terminate your agreement for cause and to disqualify you without any further opportunity for corrective action.

COMMENTS

Sincerely,

Sponsor Employee Name and Title

Sponsoring Organization Name

cc: GA DECAL