

The Minute Menu System requires that we input provider helper information into the system. If you have a helper, please complete the information below and return this with your menus. This will help prevent some warning messages on your Claim Summary & Error Report for each month. Thank you!

**PROVIDER HELPER INFORMATION**

CHILD CARE PROVIDER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

HELPER'S NAME(S): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_