

CHILDREN'S MEAL COUNT BY INDIVIDUAL NAME FORM

(Use Other Form for Infants)

- To be used by sponsors who are approved to serve more than 2 meals and 1 snack OR 2 snacks and 1 meal per day. Also for sponsors who may be requested to record meal counts by individual child.
- Record all creditable meals served to each child for the day by entering an "X". Before submitting the monthly claim, center administration must circle the meal/snack that will not be claimed if the total served to the child is over 2 meals and 1 snack OR 2 snacks and 1 meal.

| MO.: _____ YR: _____ WEEK OF: _____ - _____ CLASSROOM: _____ TEACHER: _____ | MONDAY | | | | | | TUESDAY | | | | | | WEDNESDAY | | | | | | THURSDAY | | | | | | FRIDAY | | | | | |
|--|-----------|----------|-------|----------|--------|---------------|-----------|----------|-------|----------|--------|---------------|-----------|----------|-------|----------|--------|---------------|-----------|----------|-------|----------|--------|---------------|--------|--|--|--|--|--|
| | Breakfast | AM Snack | Lunch | PM Snack | Supper | Evening Snack | Breakfast | AM Snack | Lunch | PM Snack | Supper | Evening Snack | Breakfast | AM Snack | Lunch | PM Snack | Supper | Evening Snack | Breakfast | AM Snack | Lunch | PM Snack | Supper | Evening Snack | | | | | | |
| CHILD'S NAME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| DAILY MEAL COUNT TOTALS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| MEAL COUNT TOTALS FOR PAGE (WEEK) | BREAKFAST | AM SNACK | LUNCH | PM SNACK | SUPPER | EVENING SNACK |
|-----------------------------------|-----------|----------|-------|----------|--------|---------------|
| | | | | | | |