Meal Count

Please star (*) the names of your own children. You may claim up to 2 meals and 1 snack or 2 snacks and 1 meal per day per child. Children must be in attendance and served during the meal service time to be claimed. Menus and Meal Counts must be kept up daily. Menus for the previous month are due to be postmarked by the 4th of the current month.

	Date	Date	Date	Date	Date	Date	Date
Name (First and Last)	SUN	MON	TUES	WED	THU	FRI	SAT
1. Age_____	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE
2. Age_____	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE
3. Age_____	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE
4. Age_____	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE
5. Age_____	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE
6. Age_____	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE	B AM L PM D EVE

Meal Service Times		**DAILY TOTALS**							**TOTAL**
	BREAKFAST								
	AM SNACK								
	LUNCH								
	PM SNACK								
	DINNER								
	EVENING SNACK								

Be sure to keep at least two hours from the end of one meal to the beginning of the next meal.

Sign in/out- Children who do not live in the home must have parents sign in and sign out daily.

Child Name	Print Parent Name	Date	Time in	Signature	Time Out	Signature	Time in	Signature	Time Out	Signature
1.										
2.										
3.										
4.										
5.										
6.										