

DAILY MEAL COUNT FORM FOR USE IN CEP SCHOOLS

Site Name:

Meal Type (circle): B L

Supervisor's Name:

Date:

Meals Served to Students (cross off number as each student receives a meal)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
61	62	63	64	65	66	67	68	69	70	71	72	73	74	75
76	77	78	79	80	81	82	83	84	85	86	87	88	89	90
91	92	93	94	95	96	97	98	99	100	101	102	103	104	105
106	107	108	109	110	111	112	113	114	115	116	117	118	119	120
121	122	123	124	125	126	127	128	129	130	131	132	133	134	135
136	137	138	139	140	141	142	143	144	145	146	147	148	149	150
151	152	153	154	155	156	157	158	159	160	161	162	163	164	165
166	167	168	169	170	171	172	173	174	175	176	177	178	179	180
181	182	183	184	185	186	187	188	189	190	191	192	193	194	195
196	197	198	199	200	201	202	203	204	205	206	207	208	209	210
211	212	213	214	215	216	217	218	219	220	221	222	223	224	225
226	227	228	229	230	231	232	233	234	235	236	237	238	239	240
241	242	243	244	245	246	247	248	249	250	251	252	253	254	255
256	257	258	259	260	261	262	263	264	265	266	267	268	269	270
271	272	273	274	275	276	277	278	279	280	281	282	283	284	285
286	287	288	289	290	291	292	293	294	295	296	297	298	299	300

TOTAL MEALS SERVED (from front and back) =

Meals served to *paying* adults

1 2 3 4 5 6 7 8 9 10

Total Adult Meals =

By signing below, I certify that the above information is true and accurate:

SIGNATURE:

DATE:

Daily Meal Count Form Instructions

Each day, each school must take a meal count at every point of service. Cross out a number as students pass through the meal service line and receive a complete, reimbursable meal. The form also should be used to count meals served to paying adults. It is very important that documentation of meal counts contain all the items listed in the form for the Director to track and control food service at each site.

The form should be signed by the supervisor.

Correct: ~~1~~ ~~2~~ ~~3~~ ~~4~~ 5

Incorrect: 1 ~~2~~ ~~3~~ ~~4~~ (5)

PAGE 2 - CONTINUATION PAGE FOR DAILY MEAL COUNT FORM

Meals Served to Children (cross off number as each child receives a meal)

301	302	303	304	305	306	307	308	309	310	311	312	313	314	315
316	317	318	319	320	321	322	323	324	325	326	327	328	329	330
331	332	333	334	335	336	337	338	339	340	341	342	343	344	345
346	347	348	349	350	351	352	353	354	355	356	357	358	359	360
361	362	363	364	365	366	367	368	369	370	371	372	373	374	375
376	377	378	379	380	381	382	383	384	385	386	387	388	389	390
391	392	393	394	395	396	397	398	399	400	401	402	403	404	405
406	407	408	409	410	411	412	413	414	415	416	417	418	419	420
421	422	423	424	425	426	427	428	429	430	431	432	433	434	435
436	437	438	439	440	441	442	443	444	445	446	447	448	449	450
451	452	453	454	455	456	457	458	459	460	461	462	463	464	465
466	467	468	469	470	471	472	473	474	475	476	477	478	479	480
481	482	483	484	485	486	487	488	489	490	491	492	493	494	495
496	497	498	499	500	501	502	503	504	505	506	507	508	509	510
511	512	513	514	515	516	517	518	519	520	521	522	523	524	525
526	527	528	529	530	531	532	533	534	535	536	537	538	539	540
541	542	543	544	545	546	547	548	549	550	551	552	553	554	555
556	557	558	559	560	561	562	563	564	565	566	567	568	569	570
571	572	573	574	575	576	577	578	579	580	581	582	583	584	585
586	587	588	589	590	591	592	593	594	595	596	597	598	599	600
601	602	603	604	605	606	607	608	609	610	611	612	613	614	615
616	617	618	619	620	621	622	623	624	625	626	627	628	629	630
631	632	633	634	635	636	637	638	639	640	641	642	643	644	645
646	647	648	649	650	651	652	653	654	655	656	657	658	659	660
661	662	663	664	665	666	667	668	669	670	671	672	673	674	675
676	677	678	679	680	681	682	683	684	685	686	687	688	689	690
691	692	693	694	695	696	697	698	699	700	701	702	703	704	705
706	707	708	709	710	711	712	713	714	715	716	717	718	719	720
721	722	723	724	725	726	727	728	729	730	731	732	733	734	735
736	737	738	739	740	741	742	743	744	745	746	747	748	749	750