MENU MEAL COUNT RECORD



Provider Signature:	Control No.:	
•		

	Signature: _				Control No.:	
	_					
m 🔬	Split Shifts:	Υ	Ν	Capacity:	Month/Year:	
1112	I cortify that all the in	oforma	tion cub	mitted as part of this claim is	true and correct. Lunderstand that this information is being given in	roco

I certify that all the information submitted as part of this claim is true and correct. I understand that this information is being given in receipt of federal funds and that deliberate misrepresentation of the information may subject me to prosecution under applicable state or federal lar												ceipt al law.																							
Da	y of Week/Day of Mont (circle if no school)		No School						No School						No School						No School						No School								
ST	Fruit or Vegetable																																		
KFA	Grains(Meat/Meat /	Alt)																																	
BREAKFAST	Milk Check b	ox ed	Whole(1-2) and/or 1% or skim (2&over)							Whole(1-2) and/or 1% or skim (2&over)							Whole(1-2) and/or 1% or skim (2&over)						Whole(1-2) and/or 1% or skim (2&over)						Whole(1-2) and/or 1% or skim (2&over)						
AM SNACK	Serve from 2 food groups (write in types of milk, if served)																																		
	Meat/Alternate																																		
l_	Vegetable																																		
LUNCH	Fruit or Vegetable																																		
	Grains																																		
	Milk Check I	box ed	Whole(1-2) and/or 1% or skim (2&over)						Whole(1-2) and/or 1% or skim (2&over)						Whole(1-2) and/or 1% or skim (2&over)						Whole(1-2) and/or 1% or skim (2&over)						Whole(1-2) and/or 1% or skim (2&over)								
PM SNACK			170 OF SKITT (ZOCOVER)																																
	Meat/Alternate																																		
PER	Vegetable																																		
DINNER/SUPPER	Fruit or Vegetable																																		
N.	Grains																																		
	Milk Check b	oox ed	Whole(1-2) and/or 1% or skim (2&over)							Whole(1-2) and/or 1% or skim (2&over)						Whole(1-2) and/or 1% or skim (2&over)						Whole(1-2) and/or 1% or skim (2&over)						Whole(1-2) and/or 1% or skim (2&over)							
EVENING SNACK	Serve from 2 food groups (write in types of milk, if served)									,=====																									
Ch	ild's Name	Age		Cla	im u	p to 3	3 me	als p	er ch	ild—	one b	eing	a sn	ack	B=Br	eakfa	ast .	A=AN	∕l Sn.	L=	Luncl	ı P	= PM	Sn.	D=I	Dinne	er/Su	pper	E=E	Eveni	ng Sı	n.			
			В	Α	L	Р	D	Ε	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Ε	В	Α	L	Р	D	Е			
			B B	A	L	P P	D D	E	ВВ	A	L	P P	D D	E	В	A	L	P P	D D	E	В	A	L	P P	D D	E	ВВ	A	L	P P	D D	E			
			В	Α	L	P	D	E	В	A	L	P	D	E	В	Α	L	P	D	E	В	Α	L	P	D	E	В	A	L	P	D	E			
			В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е			
			В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е			
			B B	A	L	P P	D D	E	ВВ	A	L	P P	D D	E E	ВВ	A	L	P P	D D	E	B B	A A	L	P P	D D	E	ВВ	A	L	P P	D D	E			
			В	A	L	Р	D	E	В	A	L	Р	D	Е	В	A	L	Р	D	Е	В	A	L	Р	D	E	В	A	L	Р	D	E			
			В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е			
			В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е			
			B B	A	L	P P	D D	E	ВВ	A	L	P P	D D	E	ВВ	A	L	P P	D D	E	B B	A	L L	P P	D D	E	ВВ	A	L	P P	D D	E			
			В	A	L	Р	D	E	В	A	L	Р	D	Е	В	A	L	Р	D	Е	В	A	L	P	D	E	В	A	L	Р	D	E			
			В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е			
			В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е	В	Α	L	Р	D	Е			
			B B	A	L	P P	D D	E	ВВ	A	L	P P	D D	E	ВВ	A	L	P P	D D	E	B B	A	L L	P P		E	В	A	L	P P	D D	E			
	Column Totals:	Tier I			Ë	F	D	_		A	_	Г	В	_	В	^	_	Г	ט	_	ь	^	_		D	_		A	_		В	L			
		Tier II	t																																
I	Daily Attendance:	Tier I																																	
тот	ALS:	Tier II																																	
Ti			M L																																
		AM L									PM D E																								