

Daily Meal Count Form

Sponsor Name: _____ Site Name: _____

Date: _____ Meal Type: Breakfast Lunch Snack Supper

Day: S M T W Th F S

1. Meals received/prepared _____ plus usable previous day meals _____ = **Total meals available** _____

Delivery Time: _____ Delivered Food/Milk Temps (Unless recorded on food production record): _____

2. First meals served to children (check off as each child receives a complete meal). **Clicker:** _____

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

Total first meals: _____

3. Second meals served to children (N/A Camps/Seamless) **Total second meals:** _____

1	2	3	4	5	6	7	8	9	10
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4. Meals served to program adults (working directly with meal service; i.e. preparing, serving supervising meals)

Total program adult meals: _____

1	2	3	4	5	6	7	8	9	10
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5. Meals served to non-program adults (not directly involved with meal service; i.e. admin staff, parents, teachers) **Total non-program adult meals:** _____

1	2	3	4	5	6	7	8	9	10
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6. **Total meals served** (first meals, second meals, program adult and non-program adult meals): _____

7. **Total non-reimbursable meals** (damaged/incomplete/other): _____

8. **Total leftover meals:** _____

9. **Total meals from 6 - 8** (total meals served plus total non-reimbursable plus total leftover): _____
(should be the same number as under Number 1 Total meals available)

10. Number of additional children requesting a meal after all available meals were served:

1	2	3	4	5	6	7	8	9	10
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By signing below, I certify that the above information is true and accurate.

Signature _____
Date

Optional: Income from non-program adult meals (unless covered by other funds): _____

Instructions for Daily Meal Count Form

Each site must take a point-of-service meal count every meal service **as each child receives a complete meal including milk**. This form may be used for the daily meal count either by recording the number of meals on the “clicker” or by checking off each number.

1. Section 1 equals the total meals available. That number equals the number of meals received prepared plus the number of meals available from the previous day. If there is no refrigeration, meals must be delivered no more than one hour prior meal service. Temperatures must be taken of hot/cold food and milk and recorded. Another form may be used for this purpose.
2. Section 2 equals the total number of first meals served to children. Check off a number as each child receives a complete meal including milk. Include any teenagers, 18 and under, paid or unpaid, who are helping out at the site. (If more than 150 meals are served at the site, you may return to number one and cross off making an X or record on back of form.). If a clicker is used, record the final number in this section.
3. Section 3 equals the total number of second meals served to children. Note: Claiming of second reimbursable meals is limited to no more than two percent of the **total number of first meals served at all sites**. Second meals are not counted by Camps or Seamless Summer Option Sites.
4. Section 4 equals the total number of meals served to program adults. “Program adults” are adults who work directly as part of the operation of the food service. This includes all adults who prepare meals, serve meals, clean up, or supervise the children, including volunteers. Teachers who eat with children are considered program adults. These meals are not claimed for reimbursement; however, federal funds may cover the cost of the meals.
5. Section 5 equals the total number of meals served to non-program adults. “Non-program adults” are adults who are not directly involved in the operation of the food service. Non-program adults include any sponsor administrative staff (monitors, teachers or principals), or State or Federal reviewers, and parents. These meals are not claimed for reimbursement and either monetary or non-program funds must be used to cover the full cost of the meal (food cost, labor and benefits, operation costs, etc.).
6. Section 6 equals the total number of meals served, which is the sum of Sections 2 – 5.
7. Section 7 equals the total number of meals that are unusable because they are damaged, incomplete, or non-reimbursable. These would not be recorded under Section 2.
8. Section 8 equals the total number of leftover meals, if any.
9. Section 9 equals the sum of Sections 6, 7, and 8. It accounts for all meals and should equal Section 1.
10. Use the Section 10 at the bottom of the form to record the number of children requesting a (first) meal after all available meals were served. This information is helpful in adjusting meal orders upward.
11. The site supervisor must sign and date the meal count form.
12. Optional: If allowing non-program adults to participate and currency is collected, record the amount collected to establish an audit trail.