Weekly Meal Count Form

SITE NAME:						MEAL TYPES: ☐ Br ☐ Lu ☐ Sn ☐ Su									☐ Clicker Count Taken						
Total	Numb	er of N	1eals A	vailab	le =		Total Number of Milks						S Available =				DATE:				
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		46	47	48	49	50	51	52		54	55	56	57	58	59	60		
Total	First	Meals	Serve	d			(-) Disallowed Meals = T							OTAL MEALS TO CLAIM							
									ıble – To						als) Lef	tover	Meals	; =			
	ertify t	hat th	e infor	matio	n repo	rted is	s true	and co	rrect t	o the b	est of	my kr	nowled	lge.							
Name	e:							_ Sig	nature	·											
Total	Numb	er of N	leals A			Total Number of Milks						s Available =				DATE:					
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21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40		
41	42	43	44			47	48	49	50		52			55	56	57	58	59	60		
Total First Meals Served (-) Disallowed Meals = TOTAL MEALS TO CLAIM														М							
						(To	tal Mea	ls Availa	s Available – Total First Meals Served – Disallowed Me								eals) Leftover Meals =				
\square I certify that the information reported is true and correct to the best of my knowledge.																					
Name	e:							_ Sig	nature	:											
Total	Numb	er of N	1eals A	vailab	le =		Т	otal N	umber	of Mill	κs Avai	lable =	-	_	DAT	E:					
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41	42	43	44		46	47	48	49	50		52			55	56	57	58	59	60		
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41	42	43	44	45	46	47	48	49	50		52		54	55	56	57	58	59	60		
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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		
Total	First	Meals	Serve	d					d Meal						LS TO						
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OSPI Child Nutrition Services February 2021