Point of Service Meal Count Sheet

Classroom: _____

Week Of: _____

Instructions: Using a checkmark ✓, check off meals served to a participant at the actual time of service or, for family-style meal service, while participants are actually eating. A participant can only be claimed for a maximum of two meals and one snack, two snacks and one meal, or three snacks per day. For participants that consumed more meals/snacks than can be claimed, clearly indicate which meals/snacks will be claimed for reimbursement. Consider using color ✓ or slash marks ✓.

Names of Participants	Monday BREAKFAST	AM SNACK	LUNCH	PM SNACK	SUPPER	EVENING SNACK	Tuesday BREAKFAST	AM SNACK	LUNCH	PM SNACK	SUPPER	EVENING SNACK	Wednesday BREAKFAST	AM SNACK	LUNCH	PM SNACK	SUPPER	EVENING SNACK	Thursday BREAKFAST	AM SNACK	LUNCH	PM SNACK	SUPPER	EVENING SNACK	Friday BREAKFAST	AM SNACK	LUNCH	PM SNACK	SUPPER	EVENING SNACK
Totals																														

STAFF MEALS (Must be tracked. DO NOT CLAIM)

	Monday						Tuesday						Wednesday						Thursday						Friday					
Totals																														