

OA FOUCATION										Number of Serving Days:												
wear Count worksneet for Camps					;	Session:				Dates of Operations:												
	Date	ie																				
	Meals	В	L	S	В	L	S	В	L	S	В	L	S	В	L	S	В	L	S	В	L	S
Camper's Name	Code																					
1.																						
2.																						
3.																						
4.																						
5.																						
6.																						
7.																						
8.																						
9.																						
10.																						
11.																						
12.																						
13.																						
14.																						
15.																						
16.																						
17.																						
18.																						
1st Meals Served to <u>Eligible</u>	Children:																					
2nd Meals Served to <u>Eligible</u>																						

TOTALS:

1st Meals Served (B/L/S)	В
	L
	S
2nd Meals Served (B/L/S)	В
	L
	S

Total # of Children Enrolled	В
	L
	S
# of Children Eligible for F/R meals:	В
	L
	S