

Center Name: _____

Name of Institution: LMC Children ServicesAgreement#: 9133

**Child and Adult Care Food Program: At-Risk Afterschool Meals
Daily Attendance Roster and Meal Count Worksheet**

Daily Date		Mon			Tues			Wed			Thurs			Fri		
		✓ = In Attendance	Supper	Snack	✓ = In Attendance	Supper	Snack	✓ = In Attendance	Supper	Snack	✓ = In Attendance	Supper	Snack	✓ = In Attendance	Supper	Snack
Name																
1																
2																
3																
4																
5																
6																
7																
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20																
21																
22																
23																
24																
25																
Total# of meals/snacks served to children (Record Daily)																

Codes: B=Breakfast; PS=PM Snack; S=Supper