



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 COMMUNITY FOOD AND NUTRITION ASSISTANCE (CFNA)
 CHILD AND ADULT CARE FOOD PROGRAM (CACFP)
DAILY MEAL COUNT RECORD FOR AT-RISK AFTERSCHOOL

Name of Program:														
Date of Service: / /														
Meal Served: <input type="checkbox"/> Snack <input type="checkbox"/> Supper							Meal: <input type="checkbox"/> Prepared <input type="checkbox"/> Delivered							
Total Meals Delivered/Prepared							Delivery Temperature							
Meal Service Time:							Total Meals Available:							
Meal Tally – cross off a number as each meal is served														
1	11	21	31	41	51	61	71	81	91	101	111	121	131	141
2	12	22	32	42	52	62	72	82	92	102	112	122	132	142
3	13	23	33	43	53	63	73	83	93	103	113	123	133	143
4	14	24	34	44	54	64	74	84	94	104	114	124	134	144
5	15	25	35	45	55	65	75	85	95	105	115	125	135	145
6	16	26	36	46	56	66	76	86	96	106	116	126	136	146
7	17	27	37	47	57	67	77	87	97	107	117	127	137	147
8	18	28	38	48	58	68	78	88	98	108	118	128	138	148
9	19	29	39	49	59	69	79	89	99	109	119	129	139	149
10	20	30	40	50	60	70	80	90	100	110	120	130	140	150
Adult Meal Tally														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Total # of Meals Served to Eligible Participants:														
Total # of Meals Served to Adults:														
Total # of Leftover Meals:														
Signature of Afterschool Program Representative: _____ Date: _____														