

At-Risk Record of Meals Served

Child and Adult Food Program

Site Name: _____

***All columns MUST be filled out DAILY. Submit by the 5th of each month.**

Date	# Meals Delivered	At-Risk Supper		Check when submitted		Initial
		# First Meals	TDA (Total Daily Attendance)	Daily Sign in Sheet(s)	Weekly Meal Count Form	
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						
Total						

Submit Paperwork online at <https://daretocare.org/community-kitchen-partners/>