

CONNECTING KIDS TO MEALS

DAILY SFSP/CACFP **LUNCH/DINNER** COUNT FORM

SITE:	Date: / / Serve Time:
# Meals Received	Phone:
Supervisor/Server: (Please Print)	Site Signature: (Must be a trained Server)

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

← Mark with each meal served.

If a lot of food is left over or if you run short, call the kitchen to have your amount adjusted for the next day.
419-720-1106

****Minimal safe serving temperatures: HOT FOOD ABOVE 140F, COLD FOOD/MILK BELOW 40F. Call Connecting Kids to Meals kitchen immediately if food does not measure in these ranges when food arrives at your site.****

TOTAL MEALS SERVED: _____

	PORTION SIZE	KITCHEN TEMP	N TIME	SITE TEMP	SITE TIME
		R			
		R			
		R			

IMPORTANT: For CACFP completed meal count forms and attendance sheets and for SFSP completed meal count forms must be returned to CKM kitchen, faxed to 419-243-9960, or sent by email to DOCS@connectingkidstomeals.org **DAILY** or no later than 10:00 a.m.the next Business Day . Failure to return completed meal count forms and attendance sheets for CACFP and meal count forms for SFSP may result in an interruption of meal service.

PLEASE DO NOT WRITE ON THE MEAL COUNT FORM. ALL COMMUNICATION TO CKM SHOULD BE DONE VIA EMAIL AT INFO@CONNECTINGKIDSTOMEALS.ORG OR PHONE 419-720-1106.

KITCHEN ONLY: # Meals sent to site: _____ Kitchen Signature: _____

CONNECTING KIDS TO MEALS

DAILY SFSP/CACFP **SNACK** COUNT FORM

SITE:	Date: / / Serve Time:
# of Meals Received:	Phone:
Supervisor/Server: (Please Print)	Site Signature: (Must be a trained Server)

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

← *Mark with each meal served.*

*If a lot of food is left over or if you run short, call the kitchen to have your amount adjusted for the next day
419-720-1106*

****Minimal safe serving temperatures: HOT FOOD ABOVE 140F, COLD FOOD/MILK BELOW 40F. Call Connecting Kids to Meals kitchen immediately if food does not measure in these ranges when food**

TOTAL MEALS SERVED: _____

	PORTION SIZE
GRAIN:	
FRUIT Cup or Juice:	

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DAILY SFSP/CACFP **BREAKFAST** COUNT FORM

SITE:	Date: / / Serve Time:
# of Meals Received:	Phone:
Supervisor/Server: (Please Print)	Site Signature: (Must be a trained Server)

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
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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

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419-720-1106*

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TOTAL MEALS SERVED: _____

	PORTION SIZE	KITCHEN TEMP	KITCHEN TIME	SITE TEMP	SITE TIME
GRAIN:		R			
FRUIT:		R			
MILK:					

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DAILY CACFP **COLD LUNCH** COUNT FORM

SITE:	Date: / / Serve Time:
# Meals Received	Phone:
Supervisor/Server: (Please Print)	Site Signature: (Must be a trained Server)

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
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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

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TOTAL MEALS SERVED: _____

	PORTION SIZE	KITCHEN TEMP	N TIME	SITE TEMP	SITE TIME
PROTEIN: WG Turkey & Cheese Sandwich	2oz				
GRAIN: WG Baked Cheetos (1)	1oz	R			
FRUIT or JUICE: Pears 1/2 Cup (1)	4oz	R			
VEGETABLE: Carrot Sticks 1/2 Cup (2 Bags) w/Ranch (1)	4oz	R			
MILK: Chocolate (NF)(1)	8oz				

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DAILY CACFP **COLD DINNER** COUNT FORM

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Supervisor/Server: (Please Print)	Site Signature: (Must be a trained Server)

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
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9	19	29	39	49	59	69	79	89	99	109	119	129	139	149
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TOTAL MEALS SERVED: _____

	PORTION SIZE	KITCHEN TEMP	N TIME	SITE TEMP	SITE TIME
PROTEIN:					
GRAIN:		R			
FRUIT or JUICE:		R			
VEGETABLE:		R			
MILK:					

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