## CACFP Daily Meal Count Record by Name (Ages 1-2 Year Olds)

### Daily Totals (number of meals served)

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### Adult meals served (if applicable)

|       |   |    |   |    |   |    |   |    |   |    |   |    |   |    |   |    |   |    |   |    |   |    |

### Total Attendance for the Day

(from Attendance Record/Sheet)

|       |   |    |   |    |   |    |   |    |   |    |   |    |   |    |   |    |   |    |   |    |   |    |

### Meal Totals for the Week

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### Codes:

- B = Breakfast
- AS = AM Supplement
- L = Lunch
- PS = PM Supplement
- S = Supper
- LS = Late PM Supplement

**Center Name________________**

**Classroom:_______________________________**

**Month/Year _______________________**

**Agreement No.________________**

**Circle AGE**

(list children by age groups)

- 1 / 2
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15

**AGE**

- 1 / 2

**Date:**

- Sunday
- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday