CACFP Daily Attendance Form

MONTH: _____

(To be placed on Refrigerator) ** (Attendance needs to be checked off **DURING** each meal sitting)

_____ or at the end of each day

For your record keeping you may check off all the meals served but remember entering the meals on the computer enter only 3 allowable meal services per child

	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
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Breakfast																															
AM Snack																															
Lunch																															
PM Snack																															
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