

**South Carolina Department of Social Services
Summer Food Service Program (SFSP)**

DAILY MEAL RECORD FOR WEEK OF: _____

Name of Site: _____ Site Number: _____

MEAL DELIVERY/PICK-UP TICKET

Note: If you complete this section, you are not required to maintain separate daily delivery tickets.

	MON	TUE	WED	THUR	FRI
A. Number of Meals Delivered/Picked Up:	_____	_____	_____	_____	_____
Initials of Food Delivery Staff:	_____	_____	_____	_____	_____
Initials of Site Supervisor:	_____	_____	_____	_____	_____

Type of Meal: _____

Note: Use a separate sheet for breakfast, lunch, snack and supper.

	MON	TUE	WED	THUR	FRI
B. Number of Children in Attendance:	_____	_____	_____	_____	_____

MEAL COUNT RECORD

	MON	TUE	WED	THUR	FRI
C. Number of Leftover Meals: (“Line K” from yesterday)	_____	_____	_____	_____	_____
D. Number of Meals Delivered/Prepared:	_____	_____	_____	_____	_____
E. Number of Meals Damaged/Spoiled:	_____	_____	_____	_____	_____
F. Total Meals Available to Serve: (C + D - E)	_____	_____	_____	_____	_____

	MON	TUE	WED	THUR	FRI	TOTAL
G. Number of 1st Meals Served to Children:	_____	_____	_____	_____	_____	_____
H.* Number of 2nd Meals Served to Children:	_____	_____	_____	_____	_____	_____
I. * Number of Meals Served to Program Adults:	_____	_____	_____	_____	_____	_____
J. * No. of Meals Served to Non-Program Adults:	_____	_____	_____	_____	_____	_____
K. Number of Meals Leftover to be Refrigerated and Served as 1st Meals on the Next Day:	_____	_____	_____	_____	_____	_____
L. Total Number of Meals: (G + H + I + J + K)	_____	_____	_____	_____	_____	_____

Note: * If allowed by sponsor. L must equal F each day in order to account for each meal.

_____	_____
Signature of Site Supervisor	Date
_____	_____
Signature of Sponsor Monitor	Date