FOR CENTERS

May claim up to 2 meals and 1 snack, or 1 meal and 2 snacks

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FOR FAMILY DAY CARE HOMES

May claim up to 2 meals and 1 snack, or 1 meal and 2 snacks

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FOR AT-RISK AFTERSCHOOL

May claim up to 1 meal and 1 snack

* May serve 2 snacks instead of 1 meal and 1 snack with State Agency approval

^ Breakfast or lunch may be served in lieu of supper on weekends, holidays, or during school vacations during the regular school year

NAME OF CONTRACTING	ENTITY (C	:E)				NA	AME O	F SI	TE								CE	EID									мо	NTH	& Y	'EAR			
PARTICIPANT'S NAME (FIRST & LAST)	AGE	DA			ATE	Т	DAY		DATE	Τ	DAY		DA			DAY		DAT			AY		DATI	ĺ	D			DATE	Т	DA			ATE
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FOR EMERGENCY SHELTERS

May claim up to 3 meals, or 2 meals and 1 snack

NAME OF CONTRACTI	NG ENTITY	(CE)		NAME (OF SITE				CE ID			MONTH &	YEAR	
PARTICIPANT'S NAME	AGE	DAY	DATE	DAY	DATE	DAY	DATE	DAY	DATE DAY	DATE	DAY	DATE	DAY	DATE
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Program Participants :	Lunch													
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# of Program Staff & Non-Pro	gram Meals													



FOR OUTSIDE SCHOOL HOURS CARE CENTERS

May claim up to 2 meals and 1 snack, or 2 snacks and 1 meal

NAME OF CONTRACTI	NG ENTITY	(CE)					I	NAI	ME C	OF S	SITI	E									С	EIC)										мо	NT	Н&	YE	AR			
PARTICIPANT'S NAME	AGE	Γ	DAY		DA	TE		DA	Y		DAT	ſE		DA۱	1	D	ATE		D	AY		DA ⁻	TE		DA	Y	C	DAT	E	[DAY		D	DAT	E		DA۱	(D	DATE
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