Point of Service Mea Classroom: Week of:		3				beg a pa sna	inning articipa cks pe	of the int can r day.	meal, only b	during e clair rticipa	the med for ned for nts tha	eal, or r a max t cons	toward ximum umed	d the e of two more r	nd of to meals neals/s	he meas and c snacks	al <i>befo</i> one sna than c	<i>r</i> e part ack, tw an be	icipant o snac	ts leav ks and d, clea	service e the ta d one n arly indi	able). F neal, o	Recall to	that	
	Monday						Tue	sday	1		Wednesday					Thursday					Friday				
Names of Participants	BREAKFAST	AM SNACK	LUNCH	PM SNACK		BREAKFAST	AM SNACK	LUNCH	PM SNACK		BREAKFAST	AM SNACK	LUNCH	PM SNACK		BREAKFAST	AM SNACK	LUNCH	PM SNACK		BREAKFAST	AM SNACK	LUNCH	PM SNACK	
Totals																									
STAFF MEALS (Must be tracked. DO NOT CLAIM)																									
					-										-										
															_										
Totals																									