DAILY MEAL COUNT EDIT CHECK WORKSHEET BY SITE (MONTHLY)

District/Agency Name (insert name below ⇩before duplicating form)

Site	**Claim Month and Year**

A. FREE MEAL ELIGIBLE (calculation)

Number approved eligible for free meals for current month _____

(Multiplied by the *Attendance Factor)** ***x*** _____ ***%***

= _____
(*Attendance-Adjusted Eligible*)

B. REDUCED-PRICE ELIGIBLE (calculation)

Number approved eligible for reduced-price meals for current month _____

(Multiplied by the *Attendance Factor)** ***x*** _____ ***%***

= _____
(*Attendance-Adjusted Eligible*)

C. PAID MEAL ELIGIBLE (calculation)

Total enrolled [MINUS] [those approved eligible for reduced-price meals plus those approved for free meals]

for current month _____

(Multiplied by the *Attendance Factor)** ***x*** _____ ***%***

= _____
(*Attendance-Adjusted Eligible*)

Compare (by category) this site's daily meal counts to the above *Attendance-Adjusted Eligible* figures for this month and check the appropriate statement below:

_____ Daily meal counts **DO NOT** exceed the *Attendance-Adjusted Eligible* figures above in any meal eligibility category on any day during this month.

_____ Daily meal counts identified below **EXCEEDED** the *Attendance-Adjusted Eligible* figures above, on the following dates, in one or more meal eligibility categories, for the following reasons(s):

Date	Meal Count	Eligibility Category (F, R, or P)	Reason	Date	Meal Count	Eligibility Category (F, R, or P)	Reason

*USE THE NATIONAL ATTENDANCE FACTOR FOR THE CURRENT SCHOOL YEAR. AS AN EFFECTIVE MANAGEMENT TOOL, THE ACTUAL SITE AF MAY BE USED.

EVALUATOR'S SIGNATURE	**DATE**