# APPENDIX D

# Child and Adult Care Food Program (CACFP) Improper Payment Meal Claims Assessment (OMB No.: 0584-NEW)

Project Officer: Fred S. Lesnett

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Room 1014

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## **FDCH Onsite Observation Form**

### **FDCH Onsite Observation Form**

CHILD AND ADULT FOOD CARE PROGRAM (CACFP) MEAL CLAIMS ASSESSMENT ICF Macro

Attn: Erika Gordon, Project Director 11785 Beltsville Drive, Suite 300 Calverton, MD 20705 Tel: (800) 840-8248

Public reporting burden for this collection of information is estimated to average 120 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Services, Office of Research and Analysis, Room 1014, Alexandria, VA 22302 ATTN: PRA (0584-xxxx\*). Do not return the completed form to this address.

CACFP MEAL CLAIMS ASSESSMENT	OMB #
FDCH ONSITE OBSERVATION FORM	DATA COLLECTOR ID:

SPONSOR'S NAME: PROVIDER'S NAME: PROVIDER'S ADDRESS: TELEPHONE NUMBER:	CITY	STZIP	-		ACRO SPON		T1 - T2 -		MVED =
TELLI HONE NOMBER.		ONSITE? Y/N Additional Information:			TROVIDI	ZK TIEK.	11 12		
I. BACKGROU	ND INFORMATION								
TOTAL CHILD ENROLLI SPONSOR RECORD:	COMPLETED BY MENT FROM HQ STAFF:	APPROVED FDCH MEAL SERVICE:	BREAKFAS T (B)	AM SNACK (AS)	Lunch (L)	PM SNACE (PS)	SUPF (S)		EVENING SNACK (ES)
Total number of infants ( Total number of preschool Total number of school-ag									
DATES OF OBSERVATION:	/	Days of the Week for Schei Observation (Select 2 days):	DULED		MON	TUES	WED	THU	FRI
FIRST DATE OF VISIT:	// (MM/DD/YYYY)	MEAL OBSERVATION INFORMATION	ON						
DATA COLLECTOR TIME OF ARRIVAL:	:	MEAL(S) TO BE OBSERVED ON DAY 1 (At least 2 must be selected):	Breakfast (B) □	AM Snack (AS)	Lunch (L)	PM Sna (PS)	(:	oper S)	Evening Snack (ES)
IS FDCH OPERATING ON DAY OF VISIT?	□ Yes □ No	MEAL(S) TO BE OBSERVED ON DAY 2 (At least 2 must be selected):	Breakfast (B) □	AM Snack (AS)	Lunch (L)	PM Sna (PS)	(:	oper S)	Evening Snack (ES)

MONITO	R'S OR?		☐ Yes ☐ No																
MONITOI FOR ALL	R PRESENT VISITS?	Γ	☐ Yes ☐ No		MC	NITOF	R'S TE	LEPH	IONE 1	NUMBER :									
FIRST OBSE	T ERVATI	ION	DATE OF OBSERVAT	ION: _		/	_/		овя	ERVER AR	VL. TIME:	_ _	_:	_		OBSI	ERVER I	DPT. TIM	ME: :
RECORD	THE ATTE	ENDANCE A	AT TIME OF ARRIVAL:		ME	AL OB	SERV	ED:		MEAL S	ERVICE TIM	<u>IE</u> OBS	ERVI	ED:	S		DULED IE OF M	START	SCHEDULED END TIME OF MEAL:
NUMBEI MEAL SE		OREN PRES	SENT AT START OF	В	A S	L	P S	S	E S	B			E S			1111	E OF M	I <b>EAL:</b>	TIME OF MEAL:
		ТОТА	L											7	-		(AM/PM)	-	(AM/PM)
		CACFF	PARTICIPATING								-   -   -	-   -	"		(		RVED S		OBSERVED END
		CACFF	P NON-PARTICIPATING										·			1110	IE OF M	EAL:	TIME OF MEAL:
															_	_	:	_	:
NUMBER	R OF INFANT	TS PRESEN	T:												T47.		(AM/PM)	1	(AM/PM)
																	ılaren a e? <b>□YES</b>		tting when you arrived at
A. CO	DLLECT C	CHILD A	TTENDANCE AND M	EAL	SER	VED					7.								
II .	<b>Name</b> (Rest Name):	ecord Firs	st Name, Middle Initial,		Age a	and A	lge (	Grou	р	Provider Child?	In CACFP?						d Mea Servic		ed to the Child for
										•	021011							. <del>.</del> .	
1						Mon	nths/Y	ears		□YES	□YES	В	AS	L	PS	S	ES	☐ Ch	ild consumed formula
1				IN	FANT	PF	RE-	SCH	OOL				AS	L 🗆				☐ Chi	ild consumed food from me replacing meal
				IN	FANT	PF SCH		SCH	GE	□YES	□YES	В			PS	S	ES	☐ Chi ☐ Chi ☐ Chi ☐ Chi ☐ Chi	ild consumed food from me replacing meal ild was not served a meal ild arrived during
(Fir	irst Name)	(MI)	(Last Name)	IN		PF SCH	RE-	SCH A	GE	□YES	□YES	В	_		PS	s □	ES	☐ Chi	ild consumed food from me replacing meal ild was not served a meal ild arrived during eal service ild consumed formula
	irst Name)	(MI)	(Last Name)			PF SCH	RE-	SCH A	GE	□YES □NO	□YES □NO	В			PS	S	ES	Chi hori Chi hori Chi hori Chi Chi Chi hori	ild consumed food from me replacing meal ild was not served a meal ild arrived during eal service
(Fir	irst Name)	(MI)	(Last Name)		FANT	Mon SCH	RE- OOL onths/Ye	SCH A ears	GE OOL GE	□YES □NO □YES	□YES □NO □YES	В	_		PS	s □	ES	Chi hor	ild consumed food from me replacing meal ild was not served a meal ild arrived during eal service ild consumed formula ild consumed food from me replacing meal ild was not served a meal
(Fin	irst Name)	(MI)	(Last Name) (Last Name)			Mon SCH	RE- OOL nths/Ye	SCH A ears	GE ]	□YES □NO □YES □NO	□YES □NO □YES □NO	В	AS	L	PS  PS	s 	ES   ES	Chi	ild consumed food from me replacing meal ild was not served a meal ild arrived during eal service ild consumed formula ild consumed food from me replacing meal ild was not served a meal ild arrived during eal service
(Fin					FANT	PF SCH	RE- OOL onths/Ye	ears SCH A	GE OOL GE	□YES □NO □YES □NO	□YES □NO □YES □NO	В	AS	L	PS  PS	s 	ES   ES	Chi hor Chi Chi Chi Chi Chi Chi	ild consumed food from me replacing meal ild was not served a meal ild arrived during eal service ild consumed formula ild consumed food from me replacing meal ild was not served a meal ild arrived during eal service ild consumed formula
(Fire				IN	FANT	PF SCH	RE- IOOL Inths/York RE- IOOL	SCH Al  Ears SCH Al  (ears	GE OOL GE	□YES □NO □YES □NO	□YES □NO □YES □NO	B B	AS □	L D	PS  PS  □	s s c	ES ES	Chi hor	ild consumed food from me replacing meal ild was not served a meal ild arrived during eal service ild consumed formula ild consumed food from me replacing meal ild was not served a meal ild arrived during eal service ild consumed formula

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### **Expiration Date:** xx/xx/xxxx

4					Months/	Vears	□YES	□YES	В	AS	L	PS	s	ES	☐ Child consumed formula☐ Child consumed food from
				INFANT	PRE-	SCHOOL	□no	□no							home replacing meal
					SCHOOL	AGE			╽╚┖						☐ Child was not served a meal☐ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
5					Months/	Years	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO							home replacing meal  Child was not served a meal
					SCHOOL	AGE			╽└ᆣ						☐ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service  Child consumed formula
6					Months/	Years	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO							home replacing meal  Child was not served a meal
					SCHOOL	AGE			╽└▔					_	☐ Child arrived during
	(First Name)	(MI)	(Last Name)				- Turno	- Type							meal service  Child consumed formula
7					Months/	Years	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO							home replacing meal  Child was not served a meal
					SCHOOL	AGE					l				☐ Child arrived during
	(First Name)	(MI)	(Last Name)				□YES	□YES					_		meal service  Child consumed formula
8					Months/	Years			B	AS	L	PS	S	ES	☐ Child consumed food from
				INFANT	PRE- SCHOOL	SCHOOL AGE									home replacing meal  Child was not served a meal
	(First Name)	(MI)	(Last Name)								I				☐ Child arrived during meal service
9	(FIRST Name)	(IVII)	(Last Name)				□YES	□YES		4.0		DC		TIC.	☐ Child consumed formula
9				TAIL VALUE	Months/	Years SCHOOL	□NO	□NO	B	AS	L	PS	S	ES	☐ Child consumed food from home replacing meal
				INFANT	SCHOOL	AGE									☐ Child was not served a meal
	(First Name)	(MI)	(Last Name)												☐ Child arrived during meal service
10	(		( ,		Months/	Voore	□YES	□YES	В	AS	L	PS	s	ES	☐ Child consumed formula
				INFANT	PRE-	SCHOOL	□no	□no		710		10	-		☐ Child consumed food from home replacing meal
				INFANI	SCHOOL	AGE									☐ Child was not served a meal☐ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
11					Months/	Years	□YES	□YES	В	AS	L	PS	s	ES	☐ Child consumed formula☐ Child consumed food from
				INFANT	PRE- SCHOOL	SCHOOL AGE	□NO	□NO							home replacing meal  Child was not served a meal
	(First Name)	(MI)	(Last Name)								I				☐ Child arrived during

															n	neal service
12					Months/Y	/ears	□YES	□YES	В	AS	L	PS	S	ES	1	Child consumed formula
				INFANT	PRE-	SCHOOL	□NO	□no							h	ome replacing meal
				INTAINI	SCHOOL	AGE										Child was not served a meal
	(First Name)	(MI)	(Last Name)												l	Child arrived during neal service
13	<u> </u>				Months/Y	/ears	□YES	□YES □NO	В	AS	L	PS	S	ES		Child consumed formula Child consumed food from
				INFANT	PRE- SCHOOL	SCHOOL AGE	- □NU	LINU							□ c	nome replacing meal Child was not served a meal Child arrived during
	(First Name)	(MI)	(Last Name)													neal service
14					Months/Y	l'ears	□YES □NO	□YES	В	AS	L	PS	S	ES	□ c	Child consumed formula Child consumed food from nome replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE									□ c	child was not served a meal Child arrived during
	(First Name)	(MI)	(Last Name)												n	neal service
В.	CLOSE-0	UT QUE	ESTIONS ON CHILD AT	TENDANC	E											
AT T	MBER OF CHI THE END OF AL SERVICE:		Were all children served at the same time for this eating occasion?				_:  l was served		oeing s	erved	□YES	S, prov	vider	served a	differe	ent meal □NO
	TOTAL		□ YES	2. Child's ar	rival time : _		_:	_								
	CACFP PARTICII	PATING	□ NO→Child(ren) arrived during meal service	Was child ser	ved a meal?	□YES, child	l was served	same meal l	oeing s	erved	□YES	S, prov	vider	served a	differe	ent meal □NO
	CACFP NO	N-					:									
	PARTICII			Was child ser	ved a meal?	☐YES, child	l was served	same meal l	oeing s	erved	□YE5	S, prov	vider	served a	differe	ent meal □NO
				Name(s) and	ages of child	d(ren) nappi	ng/otherwise	occupied:								
				1				A	ge:		CACF	P Part	ticipat	ting: 🗆 YE	s □no	
			□ NO→Child(ren) were napping/otherwise occupied	2				A	ge:		CACF	P Part	ticipat	ting: □YE	s □no	
			during meal service	3				A	ge:		_ CAC	FP Par	ticipa	ating: □YE	s 🗆 NC	)
			Total number of infants served during the meal service:	Number of in formula prov			ie(s) of infants parent:	s receiving fo	rmula		1					
								1			2					
											3					
HQ Re	eview:			Additional	Commen	nts:										

SECOND	DAME OF ODOEDVA						0.00			1			2000	DI IED I		
OBSERVATION	DATE OF OBSERVA	TION:					ORS	SERVER ARV		:_	_	—   '	DRSE	KVEK I	OPT. TIN	
		- <b>-</b>		i	i				(AM/PM)							(AM/PM)
RECORD THE ATTENDANCE AT TI	ME OF ARRIVAL:	В	AS	L	PS	S	ES	MEAL SE	ERVICE TIM	<u>IE</u> OBSER	VED:			ULED S		SCHEDULED END TIME OF MEAL:
NUMBER OF CHILDREN PRESENT	AT STADT OF		_										IIIVIE	OF MI	CAL:	TIME OF MEAL:
MEAL SERVICE:	AI SIAKI OF														ı	, , ,
TOTAL			MF	AT OF	SSERV	FD.							l	: (AM/PM)	l	(AM/PM)
			IVILL	AL UI	JOLIK V	БD.								(AM/PM)		(AM/1 M)
CACFP PAR	TICIPATING							B AS	S L P	S S E	ES					
CACFP NON	-PARTICIPATING															
										o   o   ı						
NUMBER OF INFANTS PRESENT:																
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														_:		:
														(AM/PM)		(AM/PM)
																ating when you arrived at
												the	home	? □YES	□ NO	
A. COLLECT CHILD ATTE	NDANCE AND M	EAL S	SER	VED												
Child's Name (Record First, M	iddle Initial and							Provide	In	Record	l the	Obse	rve	d Mea	l Sarv	ed to the Child for
Last Name):	dale Illicial, alla	Α	lge a	and A	Age C	Group	р	r's	CACFP?	the Ob						ed to the child for
								Child?			_					11. 10. 1
1				Mo	onths/Y	l'ears		□YES	□YES	B AS	L	PS	s	ES		aild consumed formula aild consumed food from
		INF	ANT		RE-	SCHO	OOI.	□no	□NO				$\Box$		ho	me replacing meal
					HOOL	AG										aild was not served a meal
(First Name) (MI)	(Last Name)															uld arrived during eal service

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														P	IOH Dutc: AA/AA/AAAA
2					Months/Y	'ears	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO							home replacing meal
					SCHOOL	AGE			╽╚╜	ш	Ч				☐ Child was not served a meal☐ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
3					Months/Y	'ears	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO							home replacing meal  Child was not served a meal
					SCHOOL	AGE							ш		☐ Child was not served a mean
	(First Name)	(MI)	(Last Name)												meal service
4					3.6 (1 (3)		□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula
1					Months/Y	ears	□no	□NO	В	Að	L	гэ	<u> </u>	ES	☐ Child consumed food from home replacing meal
				INFANT	PRE-	SCHOOL									☐ Child was not served a meal
					SCHOOL	AGE									☐ Child arrived during
	(First Name)	(MI)	(Last Name)	Ш											meal service
5					Months/Y	'ears	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from
				INFANT	PRE-	SCHOOL	□no	□NO							home replacing meal
				INFANI	SCHOOL	AGE									☐ Child was not served a meal
															☐ Child arrived during meal service
	(First Name)	(MI)	(Last Name)				□YES	□YES							Child consumed formula
6					Months/Y	ears			B	AS	L	PS	S	ES	☐ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO					_		home replacing meal
				11111111	SCHOOL	AGE									☐ Child was not served a meal☐ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
7	(1 not 1 tame)	(1,11)	(Zuot Prunte)		-		□YES	□YES		4.0		DO.	_	по	☐ Child consumed formula
'					Months/Y	ears	□NO	□NO	В	AS	L	PS	S	ES	☐ Child consumed food from
				INFANT	PRE-	SCHOOL									home replacing meal  Child was not served a meal
					SCHOOL	AGE				_		_	_		☐ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
8					Months/Y	ears	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula
							□no	□NO			_				☐ Child consumed food from home replacing meal
				INFANT	PRE-	SCHOOL									☐ Child was not served a meal
					SCHOOL	AGE			l '						☐ Child arrived during
	(First Name)	(MI)	(Last Name)					_	<b> </b>						meal service
9					Months/Y	ears	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from
	(First Name)	(MI)	(Last Name)						ᄔᅥ						- Cinia consumea 100a 110111

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<b>Expiration</b>	Date:	xx/x	x/xxxx

M	Months/Years PRE- SCHOOL	□YES	□YES	D AC I DC C FC	☐ Child consumed formula
	SCHOOL AGE	□NO	□NO	B AS L PS S ES	<ul> <li>□ Child consumed food from home replacing meal</li> <li>□ Child was not served a meal</li> <li>□ Child arrived during</li> </ul>
(First Name) (MI) (Last Name)M	Months/Years  PRE- SCHOOL SCHOOL AGE	□YES □NO	□YES □NO	B AS L PS S ES  □ □ □ □ □ □ □	meal service  Child consumed formula Child consumed food from home replacing meal Child was not served a meal Child arrived during meal service
12M	Months/Years PRE- SCHOOL SCHOOL AGE	□YES □NO	□YES □NO	B AS L PS S ES	Child consumed formula Child consumed food from home replacing meal Child was not served a meal Child arrived during meal service
M	Months/Years  PRE- SCHOOL SCHOOL AGE	□YES □NO	□YES □NO	B AS L PS S ES	□ Child consumed formula     □ Child consumed food from home replacing meal     □ Child was not served a meal     □ Child arrived during meal service
M	Months/Years  PRE- SCHOOL SCHOOL AGE	□YES □NO	□YES □NO	B AS L PS S ES	□ Child consumed formula     □ Child consumed food from home replacing meal     □ Child was not served a meal     □ Child arrived during meal service

B. CLOSE-OUT QUE	STIONS ON CHILD AT	TENDANCE		
NUMBER OF CHILDREN AT THE END OF THE MEAL SERVICE:	Were all children served at the same time for this eating occasion?	1. Child's arrival time : Was child served a meal? □Y		served □YES, provider served a different meal □NO
TOTAL	□ YES	2. Child's arrival time :	:	
CACFP PARTICIPATINGCACFP NON- PARTICIPATING	□ NO→Child(ren) arrived during meal service	Was child served a meal? □Y  3. Child's arrival time:	ES, child was served same meal being	served $\square$ YES, provider served a different meal $\square$ NO served $\square$ YES, provider served a different meal $\square$ NO
		Name(s) and ages of child(re	n) napping/otherwise occupied:	
		1	Age:	CACFP Participating: □YES □NO
	□ NO→Child(ren) were napping/otherwise occupied during meal service		_	CACFP Participating: □YES □NO  CACFP Participating: □YES □NO
	Total number of infants served during the meal service:	Number of infants receiving formula provided by parent:	Name(s) of infants receiving formula from parent:	1
HQ Review:		Additional Comments:		
		<del></del>		

	HIRD BSERVA	TION		DATE OF OBSERVA	TION	·	_/	/_		ОВ	SERVE	R AR	VL. TIME		_	:	_		OBS	ERVER	DPT.	TIME (AM/	Z: :	_
REC	CORD THE AT	TENDAN	CE AT TIM	IE OF ARRIVAL:		ME	AL OB	SERV	ED:		ME	AL SI	ERVICE T	IME (	OBSI	ERVE	ED:	S		OULED		T	SCHEDULEI	
II .	MBER OF CHI CAL SERVICE:	LDREN P	RESENT A	AT START OF	В	A S	L	P S	S	E S									TIM  _	E OF M	EAL:		TIME OF M	IEAL: _
		то	TAL																	(AM/PM)			(AM/PM)	
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																				e? <b>□YE</b> !		-	.g witch you ar	
A.	COLLECT	CHILD	ATTEN	IDANCE AND ME	EAL	SER'	VED																	
II .	i <b>ld's Name</b> I Last Name)		First Nar	ne, Middle Initial,		Age a	and A	\ge (	Grou		Provi r's Child		In CACFP							d Mea Servi		erved	l to the Chi	ld for
1							Mor	nths/Ye	aare		□уЕ	s	□YES		В	AS	L	PS	S	ES			consumed form	
					INI	FANT	PF		SCHO	OOL	□no	)	□NO									home	replacing meal	
							SCH	OOL	AG	BE													was not served arrived during	a meal
	(First Name)	(MI)		(Last Name)																		meal s	service	
2							Mor	nths/Yo	ears		□чЕ	s	□YES		В	AS	L	PS	S	ES			consumed form	
					INI	FANT	PF		SCHO	OOL	□N(	)	□NO						_			home	replacing meal	
							SCH	OOL	AG	GE													was not served arrived during	a meal
	(First Name)	(MI)		(Last Name)																		meal	service	
3							Mor	nths/Yo	ears		□чЕ	S	□YES									Child	consumed form	ula
	(First Name)	(MI)		(Last Name)																				

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														xpii ati	UII Date. XX/XX/XXXX
				INFANT	PRE- SCHOOL	SCHOOL AGE	□NO	□NO	В	AS	L	PS	S	ES	☐ Child consumed food from home replacing meal
															☐ Child was not served a meal☐ Child arrived during☐ meal service☐
4					Months/\	ears .	□YES □NO	□YES □NO	В	AS	L	PS	S	ES	☐ Child consumed formula☐ Child consumed food from home replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE									☐ Child was not served a meal☐ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
5					Months/Y	ears	□YES	□YES	В	AS	L	PS	S	ES	<ul><li>☐ Child consumed formula</li><li>☐ Child consumed food from</li></ul>
				INFANT	PRE- SCHOOL	SCHOOL AGE	□NO	□NO							home replacing meal Child was not served a meal
	(First Name)	(MI)	(Last Name)											<u>,                                      </u>	☐ Child arrived during meal service
6					Months/Y	/ears	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from
				INFANT	PRE-	SCHOOL	□no	□NO							home replacing meal  Child was not served a meal
					SCHOOL	AGE				_					☐ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
7					Months/Y	ears?	□YES □NO	□YES □NO	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from home replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE									☐ Child was not served a meal ☐ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
8					Months/Y	ears?	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from
				INFANT	PRE- SCHOOL	SCHOOL AGE	□NO	□NO							home replacing meal ☐ Child was not served a meal
	(First Name)	(MI)	(Last Name)		SCHOOL										☐ Child arrived during meal service
9					Months/Y	ears ears	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO							home replacing meal  Child was not served a meal
	(First Name)	(MI)	(Last Name)		SCHOOL	AGE							I		☐ Child arrived during meal service
10					Months/Y	ears	□YES	□YES	В	AS	L	PS	s	ES	☐ Child consumed formula ☐ Child consumed food from
	(First Name)	(MI)	(Last Name)												- china consumed root from

														-		
				INFANT	PRE- SCHOOL	SCHOOL AGE	□NO	□NO			home replacing meal  Child was not served a meal					
															_	l Child arrived during
															4_	meal service
11					Months/Y	ears.	□YES	□YES	В	AS	L	PS	s	ES		
							□NO	□no							"	home replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE										Child was not served a meal
					SCHOOL	AGE				-						Child arrived during
	(First Name)	(MI)	(Last Name)												+-	meal service  Child consumed formula
12					Months/Y	ears ears	□YES	□YES	В	AS	L	PS	s	ES		
				INFANT	PRE-	SCHOOL	□NO	□NO								home replacing meal
					SCHOOL	AGE										
	(First Name)	(MI)	(Last Name)													l Child arrived during meal service
	(First Name)	(MII)	(Last Name)				□YES	□YES							$\vdash_{\Box}$	
13					Months/Y	ears?			B	AS	L	PS	S	ES		
				INFANT	PRE-	SCHOOL	□NO	□NO				]			_	home replacing meal
				INFANI	SCHOOL	AGE								Ш		Child was not served a meal Child arrived during
	(First Name)	(MI)	(Last Name)												-	meal service
11	(i not i tune)	(1111)	(Zuot Trume)		·	□YES	□YES			.	ъ.		TO.		Child consumed formula	
14				Months/Years			□NO	□NO	В	AS	L	PS	S	ES		
				INFANT	PRE-	SCHOOL										home replacing meal  Child was not served a meal
					SCHOOL	AGE				_	_			_		
	(First Name)	(MI)	(Last Name)													meal service
В.	CLOSE-0	UT QUE	ESTIONS ON CHILD AT	TENDANO	CE											
NUI	MBER OF CH	ILDREN	Were all children served at													
II .	THE END OF	THE	the same time for this eating													
ME	AL SERVICE:		occasion?	Was child se	rved a meal	? ∟YES, child	l was served	same meal b	oeing se	rved	∟YE9	S, prov	vider	served a	diffe	erent meal $\square$ NO
	TOTAL		□ YES	2. Child's arrival time : :												
	CACFP		□ NO→Child(ren) arrived	Was child served a meal? □YES, child was served same meal being served □YES, provider served a different meal □NO										erent meal $\square$ NO		
	PARTICIPATING		during meal service	0 01.11.11		ı	. 1									
	CACFP NON-					:		_		_						
PARTICIPATING		PATING		Was child se	rved a meal	? ∟YES, child	l was served	same meal b	eing se	rved	∟YES	S, prov	vider	served a	diffe	erent meal □NO
				Name(s) and	l ages of chil	d(ren) nappi	ng/otherwise	occupied:								
				1				Aş	ge:	e: CACFP Participating: □YES □NO						NO
			□ NO→Child(ren) were	2.				٨	no.		CACE	D Dam	ticinat	ting: □YE	יר פי	NO
			napping/otherwise occupied	<u> </u>				A	5 <sup>c.</sup>		CACI	1 1 41	ucipai	д. ∟11	ىل ق	110
			during meal service													

	3			Age:CACFP Participating: □YES □NO											
	Number of infants receiving formula provided by parent:					Name(s) of infants receiving formula from parent:  1									
HQ Review:			Add	itiona	al Con	mmer P	nts:	E							
FOURTH OBSERVATION		ŝ	_	S	3	S	_\$	SERVER ARVL. TIME:     OBSERVER DPT. TIME:							
RECORD THE ATTENDANCE AT TIME OF ARRIVAL:  NUMBER OF CHILDREN PRESENT AT START OF MEAL SERVICE: TOTALCACFP PARTICIPATINGCACFP NON-PARTICIPATING NUMBER OF INFANTS PRESENT:				ME	AL OF	BSERV	ED:			MEAL SERVICE TIME OBSERVED:    B					
									(AM/PM) (AM/PM)  Were children already eating when you arrived at the home? □YES □ NO	t					

A. COLLECT CHILD ATTENDANCE AND MEAL SERVED															
ll .	ld's Name ( t Name):	(Record	First, Middle Initial, and	Age and Age Group			Provide r's Child?	In CACFP?	Record the Observed Meal Served to the Child for the Observed Meal Service:						
1				INFANT	Months/Year PRE- S SCHOOL	SCHOOL AGE	□YES □NO	□YES □NO	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from home replacing meal ☐ Child was not served a meal ☐ Child arrived during
2	(First Name)	(MI)	(Last Name)	INFANT	Months/Year  PRE- SCHOOL	SCHOOL AGE	□YES □NO	□YES □NO	В	AS	L	PS	s	ES	meal service  Child consumed formula Child consumed food from home replacing meal Child was not served a meal Child arrived during meal service
3	(First Name)	(MI)	(Last Name)	INFANT	Months/Year  PRE- S SCHOOL	cs SCHOOL AGE	□YES □NO	□YES □NO	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from home replacing meal ☐ Child was not served a meal ☐ Child arrived during meal service
4	(First Name)	(MI)	(Last Name)	INFANT	Months/Year  PRE- SCHOOL	SCHOOL AGE	□YES □NO	□YES □NO	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from home replacing meal ☐ Child was not served a meal ☐ Child arrived during meal service
5	(First Name)	(MI)	(Last Name)	INFANT	Months/Year  PRE- SCHOOL	CCHOOL AGE	□YES □NO	□YES □NO	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from home replacing meal ☐ Child was not served a meal ☐ Child arrived during meal service
6	(First Name)	(MI)	(Last Name)	INFANT	Months/Year  PRE- S SCHOOL	SCHOOL AGE	□YES □NO	□YES □NO	В	AS	L	PS	s	ES	☐ Child consumed formula ☐ Child consumed food from home replacing meal ☐ Child was not served a meal ☐ Child arrived during meal service
7	(First Name)	(MI)	(Last Name)		Months/Year	'S	□YES	□YES	В	AS	L	PS	S	ES	☐ Child consumed formula ☐ Child consumed food from

				INFANT	PRE- SCHOOL	SCHOOL AGE	□no	□NO			•	home replacing meal Child was not served a meal Child arrived during meal service
8					Months/Y		□YES □NO	□YES □NO	B AS L	L PS S ES		☐ Child consumed formula☐ Child consumed food from home replacing meal
					PRE- SCHOOL	SCHOOL AGE						☐ Child was not served a meal☐ Child arrived during☐ meal service☐
9	(First Name)	(MI)	(Last Name)		Months/Y		□YES □NO	□YES □NO	B AS L	PS S	ES	Child consumed formula     Child consumed food from home replacing meal
	(First Name)	(MI)	(Last Name)		PRE- SCHOOL	SCHOOL AGE						☐ Child was not served a meal☐ Child arrived during meal service
10					Months/Y		□YES □NO	□YES □NO	B AS L	PS S	ES	☐ Child consumed formula ☐ Child consumed food from home replacing meal
	(First Name)	(MI)	(Last Name)		PRE- SCHOOL	SCHOOL AGE						☐ Child was not served a meal☐ Child arrived during☐ meal service☐
11			,		Months/Y		□YES □NO	□YES □NO	B AS L	PS S	ES	☐ Child consumed formula☐ Child consumed food from home replacing meal
	(First Name)	(MI)	(Last Name)		PRE- SCHOOL	SCHOOL AGE						☐ Child was not served a meal☐ Child arrived during☐ meal service☐
12					Months/Y		□YES	□YES	B AS L	PS S	ES	☐ Child consumed formula ☐ Child consumed food from
	(First Name)	(MI)	(Last Name)		PRE- SCHOOL	SCHOOL AGE						home replacing meal Child was not served a meal Child arrived during meal service
13	(First rvaine)	(1911)	(Last Ivalie)		Months/Y	/ears	□YES □NO	□YES	B AS L	PS S	ES	Child consumed formula     Child consumed food from home replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE						Child was not served a meal     Child arrived during     meal service
14	(First Name)	(MI)	(Last Name)		Months/Y		□YES	□YES	B AS L	PS S	ES	☐ Child consumed formula ☐ Child consumed food from
				INFANT	PRE- SCHOOL	SCHOOL AGE	□NO	□NO				home replacing meal Child was not served a meal Child arrived during
	(First Name)	(MI)	(Last Name)									meal service

B. CLOSE-OUT QUE	STIONS ON CHILD AT	TENDANCE									
NUMBER OF CHILDREN AT THE END OF THE MEAL SERVICE:	Were all children served at the same time for this eating occasion?	1. Child's arrival time : :									
TOTAL	□ YES	2. Child's arrival time : :									
CACFP PARTICIPATING CACFP NON- PARTICIPATING	□ NO→Child(ren) arrived during meal service	Was child served a meal? \( \subseteq \text{YES}, \text{ child was served same meal being served } \subseteq \text{YES}, \text{ provider served a different meal } \subseteq \text{NO} \)  3. Child's arrival time: \( \subseteq \subseteq \subseteq \subseteq \subseteq \subseteq \text{YES}, \text{ provider served a different meal } \subseteq \text{NO} \)  Was child served a meal? \( \subseteq \text{YES}, \text{ child was served same meal being served } \subseteq \text{YES}, \text{ provider served a different meal } \subseteq \text{NO} \)									
TARTICITATING			en) napping/otherwise occupie		ved 🗀 r.e.s, provider served a different meaf 🗀 NO						
		_									
		1		Age:	CACFP Participating: □YES □NO						
	□ NO→Child(ren) were napping/otherwise occupied	2		CACFP Participating: $\square$ YES $\square$ NO							
	during meal service	3		Age:	CACFP Participating: □YES □NO						
	Total number of infants served during the meal service:	Number of infants receiving formula	Name(s) of infants receiving from parent:	formula	1						
		provided by parent:			2						
					3						
HQ Review:		Additional Comments	:								