### APPENDIX D

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

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### **FDCH Onsite Observation Form**

#### **FDCH Onsite Observation Form**

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

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

#### FDCH ONSITE OBSERVATION FORM

SPONSOR'S NAME: PROVIDER'S NAME: PROVIDER'S ADDRESS:			-		ACRO SPO CRO PROV				
TELEPHONE NUMBER:	CITY	STZIP CONFIRMED ONSITE? Y/N Additional Information:			PROVID	ER TIER:	T1 🗆 T2 🛛	⊐ TIER N	∕IIXED □
I. BACKGROUN	D INFORMATION								
TOTAL CHILD ENROLLME SPONSOR RECORD:	COMPLETED BY ENT FROM HQ STAFF:	APPROVED FDCH MEAL SERVICE:	BREAKFAS T (B)	AM Snack (AS)	Lunch (L)	PM SNAC (PS)	K SUPI (S		Evening Snack (ES)
Total number of infants (11 Total number of preschool c Total number of school-age of	children (1–5 years):							]	
DATES OF OBSERVATION:	/// (MM/DD/YYYY)	DAYS OF THE WEEK FOR SCHEI OBSERVATION (Select 2 days):	DULED		MON	TUES	WED		FRI
FIRST DATE OF VISIT:	// (MM/DD/YYYY)	MEAL OBSERVATION INFORMATI	ON						
DATA COLLECTOR TIME OF ARRIVAL:	;  AM/PM	MEAL(S) TO BE OBSERVED ON DAY 1 (At least 2 must be selected):	Breakfast (B) □	AM Snack (AS)	Lunch (L)	PM Sna (PS)	(	pper 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)	(	pper S) □	Evening Snack (ES) □
SPONSOR'S MONITOR?	🗆 Yes 🗖 No	MONITOR'S TELEPHONE NUMBER :		:	•				

OMB #

DATA COLLECTOR ID:\_\_\_\_\_

-	IITOR PRESEN ALL VISITS?	NT		🗆 Yes 🗆 No		IF	NO, M	ONITO	OR PR	ESEN	T FOF	R:		] DAY	1 🗆	OBS	51	00	BS 2		D.	AY 2	□ OBS 3 □ OBS 4
	RST BSERVA1	ΓΙΟΝ		DATE OF OBSERVATI	( <b>ON</b> : _		/	/		OB	SERV	ER AF	RVL. '	TIME: (AM/PM)		:		_		OBSI	ERVER	DPT. '	TIME::
NUN MEA		LDREN P TO CA CA	RESENT VTAL CFP PA CFP NO	IME OF ARRIVAL: F AT START OF RTICIPATING N-PARTICIPATING	B	ME S		P S	/ED: S	E S	M	B /	SERV		P S	S S	RVE S	D:		TIN 	ULED IE OF M (AM/PM) CRVED S IE OF M (AM/PM) ildren a e? □YES	IEAL: _  STAR' IEAL: _  lready	TIME OF MEAL:
Α.	COLLECT	CHILD	ATTE	ENDANCE AND M	EAL	SER	VED																
	<b>d's Name</b> ( Last Name)		First N	ame, Middle Initial,		Age	and /	Age (	Grou	р		vider ild?		In ACFP?							ed Mea Servie		erved to the Child for
1	(First Name)	(MI)		(Last Name)		 FANT	P SCH	nths/Y RE- 100L	SCH	IOOL GE		YES NO		□YES □NO	B		AS		PS	<b>S</b> □	ES		Child consumed formula Child consumed food from home replacing meal Child was not served a meal Child arrived during meal service
2	(First Name)	(MI)		(Last Name)		FANT	P SCH	nths/Y RE- 100L	SCH A	IOOL GE		YES INO		□yes □no	B		AS D		PS	<b>S</b> □	ES		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)		FANT	P SCH	onths/ RE- 100L	SCH A	IOOL GE		YES NO		□YES □NO	B		AS D	L	PS	<b>S</b> □	ES		

											-		
4					Months/Y	Years	□YES	□YES	B AS	L PS	S S	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from</li> </ul>
				INFANT	PRE-	SCHOOL	□NO	□NO					home replacing meal
					SCHOOL	AGE							<ul> <li>Child was not served a meal</li> <li>Child arrived during</li> </ul>
	(First Name)	(MI)	(Last Name)										meal service
5					Months/	Years			B AS	L PS	s s	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from</li> </ul>
				INFANT	PRE-	SCHOOL	□NO	□NO					home replacing meal <ul> <li>Child was not served a meal</li> </ul>
					SCHOOL	AGE							□ Child arrived during
	(First Name)	(MI)	(Last Name)										meal service
6					Months/	Years	□YES	□YES	B AS	L PS	s s	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from</li> </ul>
						60110.01	□NO	□NO		_		_	home replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE							<ul> <li>Child was not served a meal</li> <li>Child arrived during</li> </ul>
	(First Name)	(MI)	(Last Name)										meal service
7					Months/	Voare	□YES	□YES	B AS	L PS	s s	ES	□ Child consumed formula
							□NO	□NO				10	<ul> <li>Child consumed food from home replacing meal</li> </ul>
				INFANT	PRE- SCHOOL	SCHOOL AGE							□ Child was not served a meal
	(First Name)	(MI)	(Last Name)										Child arrived during meal service
8	(Filse Fidance)	(111)	(Lust Pane)				YES	□YES	B AS	L PS	s s	ES	Child consumed formula
					Months/		□NO	□NO	D A3		, 3	LO	<ul> <li>Child consumed food from home replacing meal</li> </ul>
				INFANT	PRE- SCHOOL	SCHOOL AGE							□ Child was not served a meal
	(First Name)	(MI)	(Last Name)								•		<ul> <li>Child arrived during meal service</li> </ul>
9	(Plist Name)	(1011)	(Last Maine)							I D		70	Child consumed formula
9					Months/		□NO	□NO	B AS	L PS	S S	ES	Child consumed food from
				INFANT	PRE- SCHOOL	SCHOOL AGE							home replacing meal <ul> <li>Child was not served a meal</li> </ul>
													□ Child arrived during
	(First Name)	(MI)	(Last Name)										meal service  Child consumed formula
10					Months/	Years			B AS	L PS	S S	ES	□ Child consumed food from
				INFANT	PRE-	SCHOOL							home replacing meal <ul> <li>Child was not served a meal</li> </ul>
					SCHOOL	AGE							□ Child arrived during
	(First Name)	(MI)	(Last Name)								_		meal service  Child consumed formula
11	(First Name)	(MI)	(Last Name)		Months/		□yes □no	□YES □NO	B AS	L	S	ES	□ Child consumed food from
				INFANT	PRE- SCHOOL	SCHOOL AGE					S		home replacing meal <ul> <li>Child was not served a meal</li> </ul>
													<ul> <li>Child arrived during</li> </ul>
<u>a</u>													

														-	meal service
10					<b>I</b>			□YES				DO	0	TO	□ Child consumed formula
12					Months/Y	'ears			B	AS	L	PS	S	ES	$\Box$ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO							home replacing meal
					SCHOOL	AGE									<ul> <li>Child was not served a meal</li> <li>Child arrived during</li> </ul>
	(First Name)	(MI)	(Last Name)												meal service
	(Filse Func)	(111)	(East Name)		I		□YES		l		-				□ Child consumed formula
13					Months/Y	'ears			B	AS	L	PS	S	ES	□ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO		_	_	_	_		home replacing meal
					SCHOOL	AGE									□ Child was not served a meal
	(First Name)	(MI)	(Last Name)												<ul> <li>Child arrived during meal service</li> </ul>
	(Flist Name)	(1011)	(Last Maille)				YES	<b>∏YES</b>	l		_				Child consumed formula
14					Months/Y	'ears			B	AS	L	PS	S	ES	□ Child consumed food from
					DDD		□NO	□NO			_				home replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE									□ Child was not served a meal
															Child arrived during meal service
	(First Name)	(MI)	(Last Name)	_											
В.	CLOSE-0	UI QUI	STIONS ON CHILD AT	IENDANC	.E										
-	MBER OF CHI		Were all children served at	1 Child's ar	rival time ·	I.	_:								
	THE END OF	THE	the same time for this							_					
ME	AL SERVICE:		eating occasion?	Was child ser	ved a meal?	⊔YES, chilo	l was served :	same meal l	being s	erved	YES	, prov	vider	served a	different meal $\Box$ NO
	TOTAL		□ YES	2. Child's ar	rival time : _		_:	_							
	CACFP PARTICII	DATING	□ NO→Child(ren) arrived during meal service	Was child ser	ved a meal?	□YES, child	l was served :	same meal l	being s	erved	YES	5, prov	vider	served a	different meal 🗆 NO
			0	3. Child's a	arrival time :	. 1	:								
	CACFP NO								oind o	hormod	VEC		ridon	convod o	different meal 🗆 NO
	PARTICI	PATING		was child ser	veu a meai:		i was serveu	same mear i	being s	erveu	1 63	, prov	luer	serveu a	
				Name(s) and	ages of child	l(ren) nappi	ng/otherwise	occupied:							
				1				A	ge:		CACF	P Part	icipat	ing: 🗆 YE	s ⊡no
			□ NO→Child(ren) were napping/otherwise occupied	2				A	ge:		CACF	P Part	icipat	ing: 🗆 YE	s 🗆 NO
			during meal service	3				A			CACI	FP Par	ticipa	ting: 🗆 YE	es 🗆 no
			Total number of infants served during the meal service:	Number of in formula prov			ie(s) of infants a parent:	s receiving fo	rmula		l				
			uur mg me mear service.		ided by pare		ı parent.								
										ŝ	8				
HQ R	eview:			Additional	Commen	its:									

SECONDDATE OF OBSERVOBSERVATION///////_	ATION:	OBSERVER AR	VL. TIME:	!:	_ OBSERVER DPT. TIM	AE::: AM/PM)
RECORD THE ATTENDANCE AT TIME OF ARRIVAL: NUMBER OF CHILDREN PRESENT AT START OF MEAL SERVICE: TOTAL CACFP PARTICIPATING CACFP NON-PARTICIPATING NUMBER OF INFANTS PRESENT:		ES MEAL SI B A C C	S L PS		SCHEDULED START TIME OF MEAL: 	SCHEDULED END TIME OF MEAL: :  (AM/PM) OBSERVED END TIME OF MEAL: :
					(AM/PM) Were children already ec the home? □YES □ NO	(AM/PM) ating when you arrived at
A. COLLECT CHILD ATTENDANCE AND N	IEAL SERVED					
<b>Child's Name</b> (Record First, Middle Initial, and Last Name):	Age and Age Grou	Provide r's Child?	In CACFP?		Observed Meal Serv d Meal Service:	ed to the Child for
1 (First Name) (MI) (Last Name)	Months/Years INFANT PRE- SCHO SCHOOL AG		□yes □no		FS         S         ES         □         Ch           □         □         □         □         □         □         ho           □         □         □         □         □         □         □         □         □         □         □         Ch         ho         □         Ch         □         □         Ch         □         □         □         □         □         □         □         □         □         □         □         □         □	ild consumed formula ild consumed food from me replacing meal ild was not served a meal ild arrived during eal service

2					Months/Ye	are	□YES	□YES	В	AS	L	PS	S	ES	□ Child consumed formula
-								□NO		110	-	10		10	□ Child consumed food from home replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE									□ Child was not served a meal
											I				□ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
3					Months/Ye	are	□YES	□YES	В	AS	L	PS	S	ES	□ Child consumed formula
					· · ·			□NO		110		10		10	□ 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
4					Months/Ye	ore	□YES	□YES	В	AS	L	PS	S	ES	Child consumed formula
							□NO	□NO		110		10		10	□ 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)												meal service
5					Months/Ye		□YES	□YES	В	AS	L	PS	s	ES	□ Child consumed formula
-											-			10	□ Child consumed food from home replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE									Child was not served a meal
				П											□ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
6					Mansha /Ma		□YES	□YES	В	AS	L	PS	s	ES	□ Child consumed formula
					Months/Ye	ears		□NO		ЛЗ	Ľ	15	0	13	□ 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)												meal service
7					NF (1 /37		□YES	□YES	В	AS	L	PS	s	ES	Child consumed formula
,					Months/Ye			□NO		ЛЗ	L	13	0	10	Child consumed food from
				INFANT	PRE- SCHOOL	SCHOOL AGE									home replacing meal <ul> <li>Child was not served a meal</li> </ul>
															□ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
8					Months/Ye	ore	□YES	□YES	В	AS	L	PS	s	ES	Child consumed formula
					months/ ye	ars	□NO			110	<u> </u>	10		10	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)												meal service
9							□YES	□YES	В	AS	L	PS	s	ES	□ Child consumed formula
9	(First Name)	(MI)	(Last Name)		Months/Ye	ars			В	АЗ	L	rð	3	ES	□ Child consumed food from
			· · · · · · · · · · · · · · · · · · ·												

				INFANT	PRE-	SCHOOL	□NO	□NO						home replacing meal
					SCHOOL	AGE								□ Child was not served a meal
														□ Child arrived during
														meal service
10							□YES	□YES	B AS	L	PS	S	ES	Child consumed formula
10					Months/Y	ears			D A3	L	РЭ	3	ЕЭ	□ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO			_			home replacing meal
				INFANT	SCHOOL	AGE								Child was not served a meal
														□ Child arrived during
	(First Name)	(MI)	(Last Name)											meal service
11							□YES		B AS	т	DC	6	EC	□ Child consumed formula
					Months/Y	ears			B AS	L	PS	S	ES	□ Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO			_			home replacing meal
				111171111	SCHOOL	AGE								□ Child was not served a meal
														Child arrived during
	(First Name)	(MI)	(Last Name)											meal service
12							□YES	□YES	B AS	L	PS	S	ES	Child consumed formula
12					Months/Y				D A3	L	РЭ	3	ЕЭ	□ 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
13					Months/Y		□YES	□YES	B AS	L	PS	S	ES	□ Child consumed formula
1.0					MOIIUIS/ Y	ears		□NO	D A3	1	13	0	10	Child consumed food from
				INFANT	PRE-	SCHOOL								home replacing meal
					SCHOOL	AGE								□ Child was not served a meal
														Child arrived during meal service
-	(First Name)	(MI)	(Last Name)											
14					Months/Y	oare	□YES	□YES	B AS	L	PS	S	ES	
					Montus/ I	cars		□NO		-	10		10	Child consumed food from
				INFANT	PRE-	SCHOOL								home replacing meal
					SCHOOL	AGE								<ul> <li>Child was not served a meal</li> <li>Child arrived during</li> </ul>
		0.0												Child arrived during meal service
	(First Name)	(MI)	(Last Name)											lileal 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?	<ol> <li>Child's arrival time :</li> <li>Was child served a meal? □Y</li> </ol>		ll being serve	ed □YES, provider served a different meal □NO
TOTAL CACFP PARTICIPATING CACFP NON- PARTICIPATING	☐ YES ☐ NO→Child(ren) arrived during meal service	3. Child's arrival time :	ES, child was served same mea	-	ed □YES, provider served a different meal □NO ed □YES, provider served a different meal □NO
	■ NO→Child(ren) were napping/otherwise occupied during meal service	1 2 3		Age:	
	Total number of infants served during the meal service: 	Number of infants receiving formula provided by parent:	Name(s) of infants receiving for from parent:	rmula	1.         2.         3.
HQ Review:		Additional Comments			

	HRD BSERVA	ΓΙΟΝ		DATE OF OBSERVA	TION:		_/	/	- 0	BSE	RVER A	RVL. TIME: (AM/PM		:			OBS	ERVER I		ME: :
REC	ORD THE AT	TENDANC	E AT TIM	E OF ARRIVAL:		ME	AL OBSE	RVED:			MEAL	SERVICE TH	ME OB	SERV	ED:	S	CHEI	DULED S	TART	SCHEDULED END
11	MBER OF CHI AL SERVICE:	LDREN PI TOT		T START OF	B	A S	L P S	<b>S</b>	E S							_	TIM 	E OF ME	EAL:	TIME OF MEAL:
									-											
				ICIPATING																
NUM	IBER OF INFA			PARTICIPATING										S						
																(		RVED ST E OF ME		OBSERVED END TIME OF MEAL:
																_		:  (AM/PM)		;; (AM/PM)
																		ildren al e? <b>□YES</b>	•	iting when you arrived at
Α.	COLLECT	CHILD	ATTEN	IDANCE AND MI	EAL	SER\	/ED													
	<b>ld's Name</b> Last Name)		First Nan	ne, Middle Initial,		Age a	and Age	e Gro	up		rovide r's hild?	In CACFP?						d Mea Servic		ed to the Child for
1							Months	/Voors			□YES	□YES	В	AS	L	PS	S	ES		ild consumed formula ild consumed food from
						ANT	PRE- SCHOOL	SC	HOOL AGE		□NO	□NO							ho D Ch	me replacing meal ild was not served a meal ild arrived during
	(First Name)	(MI)		(Last Name)															me	eal service
2							Months				□YES □NO	□yes □no	B	AS	L	PS	S	ES	□ Ch	ild consumed formula ild consumed food from me replacing meal
							PRE- SCHOOI		HOOL AGE										Ch	ild was not served a meal ild arrived during
	(First Name)	(MI)		(Last Name)		_					YES	YES								eal service ild consumed formula
3	(First Name)	(MI)		(Last Name)			Months	/Years			LI 63									· · · · · · · · · · · · · · · · · · ·

													pinan	
					PRE- SCHOOL	SCHOOL AGE	□NO	□NO	B AS		PS	<b>s</b> □	ES	<ul> <li>Child consumed food from home replacing meal</li> <li>Child was not served a meal</li> <li>Child arrived during meal service</li> </ul>
4					Months/Y		□yes □no	□yes □no	B AS	L	PS	S	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from home replacing meal</li> </ul>
	(First Name)	(MI)	(Last Name)		PRE- SCHOOL	SCHOOL AGE								<ul> <li>Child was not served a meal</li> <li>Child arrived during meal service</li> </ul>
5	(First Name)		(Last Ivaine)		Months/Y	ears			B AS	L	PS	S	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from</li> </ul>
					PRE- SCHOOL	SCHOOL AGE	□NO							home replacing meal <ul> <li>Child was not served a meal</li> <li>Child arrived during</li> </ul>
6	(First Name)	(MI)	(Last Name)		Months/Y		□YES	□YES	B AS	L	PS	S	ES	meal service       Child consumed formula       Child consumed food from
				INFANT	PRE-	SCHOOL	□NO	□NO						home replacing meal <ul> <li>Child was not served a meal</li> </ul>
	(First Name)	(MI)	(Last Name)		SCHOOL	AGE								Child arrived during meal service
7					Months/Y	ears	□YES □NO	□yes □no	B AS	L	PS	S	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from home replacing meal</li> </ul>
					PRE- SCHOOL	SCHOOL AGE								<ul> <li>Child was not served a meal</li> <li>Child arrived during meal service</li> </ul>
8	(First Name)	(MI)	(Last Name)		Months/Y				B AS	L	PS	S	ES	Child consumed formula     Child consumed food from
				INFANT	PRE- SCHOOL	SCHOOL AGE	□NO							home replacing meal <ul> <li>Child was not served a meal</li> <li>Child arrived during</li> </ul>
	(First Name)	(MI)	(Last Name)											meal service
9					Months/Y				B AS	L	PS	S	ES	<ul> <li>Child consumed food from home replacing meal</li> </ul>
	(First Name)	(MI)			PRE- SCHOOL	SCHOOL AGE								<ul> <li>Child was not served a meal</li> <li>Child arrived during meal service</li> </ul>
10	(First Name)		(Last Name)		Months/Y		□YES	□YES	B AS	L	PS	S	ES	Child consumed formula     Child consumed food from
L	(First Name)	(MI)	(Last Name)				1							<u> </u>

					PRE- SCHOOL	SCHOOL AGE	□NO	□NO						1		home replacing meal Child was not served a meal Child arrived during meal service
11					_ Months/Y		□yes □NO	□yes □no	В	AS	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
12	(First Name)	(MI)	(Last Name)		Months/Y				В	AS	L	PS	S	ES		Child consumed formula Child consumed food from
					PRE- SCHOOL	SCHOOL AGE		□NO								home replacing meal Child was not served a meal Child arrived during
13	(First Name)	(MI)	(Last Name)		Months/Y	ears	□yes □no	□yes □no	В	AS	L	PS	S	ES		meal service 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
14	(First Name)	(MII)	(Last Name)		Months/Y		□yes □no	□YES □NO	В	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
Β.	<u> </u>		STIONS ON CHILD AT	TENDANO	Е.											
AT 1	ABER OF CHI THE END OF AL SERVICE: TOTAL		Were all children served at the same time for this eating occasion? <b>U YES</b>		rved a meal?		was served	 same meal b	eing s	erved	□yes	S, prov	vider	served a	diffe	erent meal 🗆 NO
	CACFP PARTICI CACFP NO PARTICII	DN-	□ NO→Child(ren) arrived during meal service	Was child se 3. Child's	rved a meal? arrival time	P □YES, child	was served									erent meal □NO erent meal □NO
					-		ng/otherwise	-								
				1				Ag	ge:		CACF	'P Part	ticipat	ting: 🗆 YE	s 🗆	NO
			□ NO→Child(ren) were napping/otherwise occupied during meal service	2				Aş	ge:		CACF	'P Part	ticipat	ting: □YE	s ⊡ì	NO

			3										_Age:		CACF	P Participating: □YES □NO	
		nber of infants served .e meal service:	recei	ving fo	infants rmula 7 paren			ame(s) arent:	) of i	infants	receiv	ing for	mula f	rom	2		
HQ Review:					al Cor												
FOURTH OBSERVATION		DATE OF OBSERVA	B T E	S S		P S	S	E S	SE	RVER	ARVI	TIM			_:	OBSERVER DPT. TII	ME: :
RECORD THE ATTENDANC	I DATE OF OBSE					SERV				<u>MEAI</u>	L SERV	VICE	ГІМЕ	OBSE	RVED:	SCHEDULED START TIME OF MEAL:	SCHEDULED END TIME OF MEAL:
	TAL 2FP PART 2FP NON-	'ICIPATING PARTICIPATING		MIL		JLKV	LD.			<b>B</b>	A S		P S	<b>S</b>	E S	:  (AM/PM)	!:  (AM/PM)
NUMBER OF INFANTS PRES	SENT:																
																OBSERVED START TIME OF MEAL:	OBSERVED END TIME OF MEAL:
																	::  (AM/PM) ting when you arrived at
																the home? 🛛 YES 🗖 NO	

A. COLLECT CHILD ATTENDANCE AND MEAL SERVED															
	<b>ild's Name</b> ( 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	(First Name)	(MI)	(Last Name)	Months/Years INFANT PRE- SCHOOL SCHOOL AGE		□yes □no	□YES □NO	B	AS		PS	<b>S</b> □	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from home replacing meal</li> <li>Child was not served a meal</li> <li>Child arrived during meal service</li> </ul>	
2	(First Name)	(MI) (MI)	(Last Name)	INFANT	Months/Y PRE- SCHOOL	ears SCHOOL AGE	□yes □no	□YES □NO	B	AS	L	PS	<b>s</b> □	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from home replacing meal</li> <li>Child was not served a meal</li> <li>Child arrived during meal service</li> </ul>
3	(First Name)	(MI)	(Last Name)	INFANT	Months/Y PRE- SCHOOL	ears SCHOOL AGE	□yes □no	□yes □no	B	AS	L	PS	<b>s</b> □	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from home replacing meal</li> <li>Child was not served a meal</li> <li>Child arrived during meal service</li> </ul>
4	(First Name)	(MI)	(Last Name)	INFANT	Months/Y PRE- SCHOOL	ears SCHOOL AGE	□yes □no	□yes □no	B	AS	L	PS	<b>S</b> □	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from home replacing meal</li> <li>Child was not served a meal</li> <li>Child arrived during meal service</li> </ul>
5	(First Name)	(MI)	(Last Name)	INFANT	Months/Y PRE- SCHOOL	ears SCHOOL AGE	□yes □no	□yes □no	B	AS		PS	<b>S</b> □	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from home replacing meal</li> <li>Child was not served a meal</li> <li>Child arrived during meal service</li> </ul>
6	(First Name)	(MI)	(Last Name)	INFANT	Months/Y PRE- SCHOOL	ears SCHOOL AGE	□yes . □no	□YES □NO	B	AS	L	PS	<b>S</b> □	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from home replacing meal</li> <li>Child was not served a meal</li> <li>Child arrived during meal service</li> </ul>
7	(First Name)	(MI)	(Last Name)		Months/Y	ears	□YES	□YES	B	AS	L	PS	<b>s</b> □	ES	<ul> <li>Child consumed formula</li> <li>Child consumed food from</li> </ul>

n														-	8
				INFANT	PRE-	SCHOOL	□NO	□NO							home replacing meal
				_	SCHOOL	AGE									□ Child was not served a meal
															Child arrived during meal service
															Child consumed formula
8					Months/Y	ears	□YES	□YES	B	AS	L	PS	S	ES	□ Child consumed food from
					·			□NO					-		home replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE									□ Child was not served a meal
															□ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
9							□YES				-	DO	6	DO	Child consumed formula
9					Months/Y	ears			B	AS	L	PS	S	ES	□ Child consumed food from
				INFANT	PRE-	SCHOOL		□NO		_		_	L		home replacing meal
				INTANT	SCHOOL	AGE									□ Child was not served a meal
															□ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
10					Months/Y	oore	□YES	□YES	В	AS	L	PS	S	ES	Child consumed formula
								□NO		110	-	10	L.	10	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)												meal service
								□YES			_				□ Child consumed formula
11					Months/Y	ears			B	AS	L	PS	S	ES	□ Child consumed food from
								□NO							home replacing meal
				INFANT	PRE- SCHOOL	SCHOOL AGE									□ Child was not served a meal
										•					Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
12					<b>NF</b> (1 (3)		□YES	□YES	В	AS	L	PS	S	ES	Child consumed formula
12					Months/Y	ears		□NO		AS	L	rə	3	ЦО	□ Child consumed food from
				INFANT	PRE-	SCHOOL									home replacing meal
					SCHOOL	AGE									<ul> <li>Child was not served a meal</li> <li>Child arrived during</li> </ul>
	(First Name)	(MI)	(Last Name)												meal service
	(Pirst Name)	(1911)	(Last Mdille)										-		Child consumed formula
13					Months/Y	ears			B	AS	L	PS	S	ES	□ Child consumed food from
							□NO	□NO							home replacing meal
				INFANT	PRE-	SCHOOL									□ Child was not served a meal
					SCHOOL	AGE									□ Child arrived during
	(First Name)	(MI)	(Last Name)												meal service
	(	()	()								_ 1				□ Child consumed formula
14					Months/Y	ears			B	AS	L	PS	S	ES	□ Child consumed food from
							□NO	□NO			_	_			home replacing meal
				INFANT	PRE-	SCHOOL									□ Child was not served a meal
		<u> </u>			SCHOOL	AGE									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 :          Was child served a meal? □YES, child was served same meal being served □YES, provider served a different meal □NO									
TOTAL	□ YES	2. Child's arrival time : :  :									
CACFP PARTICIPATING CACFP NON- PARTICIPATING	□ NO→Child(ren) arrived during meal service	Was child served a meal? <b>YES, child was served same meal being served YES, provider served a different meal NO</b> 3. Child's arrival time :  Was child served a meal? <b>YES, child was served same meal being served YES, provider served a different meal NO</b>									
		Name(s) and ages of child(ren) napping/otherwise occupied:									
		U U		CACFP Participating: $\Box$ YES $\Box$ NO							
	□ NO→Child(ren) were napping/otherwise occupied during meal service			Age:							
		3		Age:	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 for from parent:	rmula	1.         2.         3.						
HQ Review:	-	Additional Comments	:								