Georgia Department of Education

School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School Nutrition Division ADA\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Month/Year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **NUMBER OF LUNCHES SERVED DAILY** Highest number students with access to NSLP\_\_\_\_\_\_\_\_\_\_\_\_

Fund Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Highest Number of Approved Eligibles on File During Month: Free (A1)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ X Attendance Factor (B1)\_\_\_\_\_\_\_\_% = Attendance-Adjusted Eligibles (C1)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.  Reduced (A2)\_\_\_\_\_\_\_\_\_\_\_\_ X Attendance Factor (B2)\_\_\_\_\_\_\_\_% = Attendance-Adjusted Eligibles (C2)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.  Paid (A3)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ X Attendance Factor (B3)\_\_\_\_\_\_\_\_% = Attendance-Adjusted Eligibles (C3)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. | | | | | | | | |
|  | Reimbursable Student Lunches | | | |  | Non-Reimbursable Lunches | | Grand Total |
| Day  of  Month  (1) | Paid  (2) | Free  (3) | Reduced  Price  (4) | Total  (Columns 2+3+4)  (5) | Edit Documentation  (6) | Adult  Paid  (7) | Other  (8) | Reimbursable  and  Non-Reimbursable  Lunches  (9) |
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| Totals |  |  |  |  |  |  |  |  |

***I certify that to the best of my knowledge and belief, these meal counts are correct in all respects; that they were made in accordance with approved system meal accountability procedures; that they have been adjusted in accordance with results of edits; that records are available to support this claim; it is in accordance with the terms of existing agreement(s); and that payment therefore has not been received.***

## MGR/PROGRAM DIR.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DE FORM 0118, Revised August 2016 (All previous revisions are obsolete.)

This institution is an equal opportunity provider.