		Classroom: After Schoolers (6+ Monday, April 10, 2023													
		Child Name				Meal	s				Ti	me	rent ials	Parent Signature	
Age	Nbr		в	A	L	Р	D	E	Att	In	Out	In	Out	Par Init	Parent Signature
13y 2m	37	Bell, Tinker	х	x	х	x			x						
7y 11m	85	Bird, Tweety W	X	X	Х	Х			X						
9y 7m	29	Bunny, Bugs	X	X	Х	X			X						
7y 11m	78	Coyote, Wile E	х	х	х	х			Х						
10y 4m	40	Eric, Prince	х	х	х	х			Х					1	
10y 5m	30	Explorer, Dora	х	х	х	Х			Х						
12y 1m	32	Frozen, Elsa	x	x	х	х			x						
10y 4m	84	Fudd, Elmer W	X	х	х	Х			X						
12y 4m	39	Hamada, Hiro W	х	х	х	х			х						
12y 6m	35	King, Simba	x	x	х	х			x						
13y 4m	36	Lightyear, Buzz	x	x	х	х			x						
5y 9m	28	Little, Chicken	x	x	х	х			x						
9y 0m	57	McStuffins, Doc W		x	х	х			x						
6y 3m	62	Monster, Cookie	x	X	х	X			x						
5y 6m	24	Pig, Peppa	X	X	X	X			X					-	
7y 9m	60	Potter, Harry	x	X	X	X			X						
8y 6m	49	Rivera, Miguel	X	X	X	X	$\vdash$		X					$\left  \right $	
10y 5m	77	Ryder, Flynn	x	X	X	X			x						
7y 2m	83	Smash, Hulk	X	X	X	X			X						
11y 2m	58	Spirit, Fire	x	x	X	X	-		x						
13y 0m	38	Wazowski, Mike	X	X	X	X	-	<u> </u>	X						
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														1	
		Totals	21	21	21	21			21					+	

I certify that the information on this form is true and correct to the best of my knowledge and that

I will claim reimbursment only for eligible meals served to eligible participants. I understand that Teacher: misrepresentation may result in prosecution under applicable state or federal statutes.

	Classroom: Bumble Bee (1-2) Monday, April 10, 2023															
						Meal					Ti	ne		ent als		
Age	Nbr	Child Name	в	Α	L	Р	D	Е	Att	In	Out	In	Out	Pan Initi	Parent Signature	
1y 8m	46	Baby, Hercules	х	х	x	X			x							
1y 7m	53	Blonde, Rapunzel	х	х	х	x			х							
1y 4m	75	Frizzle, Mrs	х	Х	X	X			X							
1y 8m	45	Groot, I am	х	х	х	X			X							
1y 3m	79	Heeler, Bluey	х	х	X	X			X							
2y 2m	20	Jack, Jack	х	Х	X	X			X							
0y 6m	72	Jetson, Judy W	х	х	X	X			X							
2y 5m	47	Lamb, Lambie W	х	Х	X	X			X							
1y 4m	71	Lost, Dory	х	Х	х	X			X							
2y 2m	66	Madrigal, Maribel	х	х	х	x			х							
1y 3m	86	Minion, Bob	х	х	х	x			X							
2y 2m	41	Monster, Boo	х	х	x	x			X							
1y 8m	18	The First, Sophia	х	х	x	x			X							
						-		-								
						-		-								
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		Totals	13	13	13	13			13							

I certify that the information on this form is true and correct to the best of my knowledge and that

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		Classroom: Butterflies (3-5)		Ν				ril 1	0, 20	)23					
							s				Tir	me	Parent Signature		
Age	Nbr	Child Name	в	A	L	Р	D	E	Att	In	Out	In	Out	hi Ta	Parent Signature
4y 8m	34	Aladdin, Prince	X	X	X	х			X						
3y 0m	21	Baby, Boss	X	X	x	x			X						
3y 2m	91	Child, Test W	<u> </u>												
4y 1m	69	Devil, Taz W	X	X	X	Х			X						
3y 1m	17	Duck, Daffy													
3y 0m	68	Hedgehog, Sonic	X	X	X	Х			X						
4y 5m	64	Jasmine, Princess	X	x	x	х			X						
5y 4m	25	Kitty, Hello	X	X	X	Х			X						
4y 2m	59	Man, Bat	X	X	X	х			X						
5y 3m	67	Moon, Stanley	X	X	X	Х			X						
5y 2m	44	Nancy, Fancy	X	X	х	Х			X						
3y 0m	56	Pickles, Tommy	x	X	X	X			X						
2y 7m	50	Piggy, Ms.	X	X	X	X			X						
3y 8m	51	Pink, Piglet	X	Х	Х	Х			X						
2y 9m	52	Pooh, Winnie	X	X	X	Х			X						
4y 3m	61	Simpson, Bart	X	х	х	х			x						
4y 8m	23	Waialiki, Moana	X	х	х	х			Х						
3y 5m	63	Woman, Super	X	х	х	х			X						
4y 4m	19	Yoda, Baby	X	х	х	х			X						
				-	-		-								
				-	-		-								
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		Totals	l ''	''	''	''			''						

I certify that the information on this form is true and correct to the best of my knowledge and that

I will claim reimbursment only for eligible meals served to eligible participants. I understand that misrepresentation may result in prosecution under applicable state or federal statutes.

Classroom: Infant Room Monday, April 10, 2023															
			Meals						1				Parent Signature		
Age	Nbr	Child Name	в	A	L		D	E		In	Out	In	Out	a E	Parent Signature
0y 3m	42	De'Ville, Cruella	х	х	х	х			Х						
								<u> </u>							
				-	-			-							
				-	-			-							
				-	-			-							
				$\vdash$	-	$\vdash$		$\vdash$							
				-	-			-							
				-	-			-							
					-			-							
								-							
		Totals	1	1	1	1			1						

I certify that the information on this form is true and correct to the best of my knowledge and that

I will claim reimbursment only for eligible meals served to eligible participants. I understand that misrepresentation may result in prosecution under applicable state or federal statutes.