PINELLAS COUNTY SCHOOLS
FOOD AND NUTRITION

CITY OF ST. PETERSBURG SNACK PROGRAMS
MONTHLY SUMMARY REPORT

COST CENTER # _____ SCHOOL NAME:_____

RECREATION CENTER NAME: _____

A	B	C
DATE	# SNACKS PROVIDED	VERIFIED BY
TOTAL UNITS		

D	E
UNIT COST	TOTAL COST

Signature: _____
(Cafeteria Manager)

INSTRUCTIONS	Daily: Complete columns A, B and C Monthly: Total column B, complete columns D & E, sign and route as noted.

White – Cafeteria Finance, Administration Building Yellow – F&N Manager's File Pink – Recreation Site