

PINELLAS COUNTY SCHOOLS
FOOD SERVICE

RECEIPT OF MEALS/FUNDS

_____ acknowledges receipt of _____
Approved Center Number of Student Meals

_____ and a la carte items _____
Number of Adult Meals

_____ acknowledges receipt of \$ _____ funds
School

collected from _____
Approved Center

Signature: _____ Date _____
Approved Center

Signature: _____ Date _____
School

INSTRUCTIONS FOR COMPLETION OF RECEIPT OF MEALS/FUNDS

Prior approval of Director of Food Services is required.

1. Approved Center sends list (meal request form) of student/adult meals along with funds collected to School.
2. School completes a roster to account for Free and Reduced Priced or full priced meals served to students and adults. Information taken from meal request form.
3. Roster is point of sale accountability.

White – Approved site Yellow – Satellite School Pink – Production School