

**CASH REPORT FOR MEALS SOLD TO ADULTS (PROGRAM INCOME)
SUMMER FOOD SERVICE PROGRAM (SFSP)**

DATE: _____ NAME OF MEAL SITE: _____

NON-PROGRAM ADULT MEALS	TOTAL SOLD	X	PRICE OF MEAL	=	TOTAL INCOME
Adult Breakfasts		X		=	
Adult Lunches		X		=	
Milks		X		=	
TOTAL				=	\$

BILLS	+	COIN	+	CHECKS	=	TOTAL
	+		+		=	

Signature of Sponsor Representative

Date

Signature of Sponsor Representative

Date

OVER _____ SHORT _____ EVEN _____