Child and Adult Care Food Program
ENROLLMENT DATA SUMMARY
Fiscal Year 2007–08

Name of Institution _____

The enrollment in our Child and Adult Care Food Program for each site by program type based on the family size and income scales effective July 1, 2007, through June 30, 2008, is as follows:

Site No.	Name of Site	Enrollment			
		Free	Reduced-Price	Above-Scale	Total
(additional space on reverse side of form)	**Total Page 1**				
	Total Page 2				
	GRAND TOTAL				

One calendar month or "30-day study" covered the period _____ 200___ through _____ 200___.

Renewing Institutions: For internal use only—Do not return to OSPI.
New Institutions: Send to OSPI with your agreement.
<u>All</u> Institutions: Maintain a copy for audit purposes.

Site No.	Name of Site	Enrollment			
		Free	Reduced-Price	Above-Scale	Total
	Total Page 2				