



## HANDOUT # 20

### CHILD AND ADULT CARE FOOD PROGRAM (CACFP) TRAINING DOCUMENTATION

This documentation must be completed for the required annual training in the Child and Adult Food Program (CACFP). Attach a detailed agenda, sign-in sheets and any handouts that were distributed at the training. Records must be maintained on file three years.

SPONSOR AGREEMENT NUMBER 300-51-547-4

SPONSOR NAME Lemons Inc.

LOCATION \_\_\_\_\_ DATE \_\_\_\_\_ TIME \_\_\_\_\_

NAME AND TITLE OF TRAINER Paige Davis, Sponsor

TOPICS DISCUSSED: (Check that box for the topic(s) presented)

Attendance	(X)
Enrollment	(X)
Income Eligibility	(X)
Infant Meal Pattern	(X)
Breast Feeding	(X)
Child Meal Pattern	(X)
Adult Meal Pattern	(X)
Menu Recordkeeping	(X)
Meal Count Procedures	(X)
Monitoring	(X)
Time and Attendance	(X)
Itemized Receipts	(X)
Tiering	(X)
Claim for Reimbursement	(X)
Food Safety and Sanitation	(X)
Title XX Eligibility	(X)
Civil Rights	(X)
PDE Memoranda (Subject _____)	(X)
Other _____	

PDE CACFP-13006, PDE CACFP-21013, PDE CACFP-21019,

#### ATTENDANCE SIGN-IN

Name (printed) Title/Position Signature

Attach additional attendance	Sign-in sheets (if needed)	