LAUSD Food Services Division Production Records School Location & Location Code: Date: Seving Period: # of Reimbursable Meals: **Total Meals Served:** Offer vs. Serve **INVENTORY USED** Non-Total Student Cost of Recipe **Portion Portion Adult** Reimburs **Amount Amount Amount** Cases, **Item Description** Projected Meal **Amount** Number **Prepared** Size Cost Served able/a la Leftover Used Units, Broken **Portions** Servings Used carte Servings Comments: **Food Services Manager** Signature: **Food Services** Manager, by signing, is certifying that the information on the report is true, correct

and in accordance with Food Services policies and procedures.

Food Service Worker Signature: