





## Infant Daily Report

| Name:                          | Date:            |              |               |           |               |        |
|--------------------------------|------------------|--------------|---------------|-----------|---------------|--------|
| My provider wants              | to share what :  | [ did today! |               |           |               |        |
| For Breakfast I at             | e:               |              | all           | some      | none          |        |
| For Lunch I ate:               |                  |              |               | some      | none          |        |
| For snack I ate:               |                  |              | all           | some      | none          |        |
| This is how many be            | ottles I drank t | today:       |               |           |               |        |
| Time:                          | oz:              |              | Time:         |           | oz:           |        |
| Time:                          | oz:              |              | Time:         |           | oz:           |        |
| Time:                          | oz:              |              | Time:         |           | oz:           |        |
| Bowel Movements:               | 1234             | They we      | ere: Norm     | nal Loo   | se Hard       |        |
| Nap time:                      | to               |              | Nap time      | :         | to            |        |
| This is how I played<br>today: |                  |              |               |           |               |        |
| Special Notes from             | n my Provider:_  |              |               |           |               |        |
|                                |                  |              |               |           |               |        |
| My provider wants              | to remind you t  | to please br | ing the fol   | lowing to | o daycare tom | orrow! |
| Diapers Oi                     | ntment           | Wipes        | Formu         | Ila       | _ Powder      |        |
| Baby Food<br>Other             |                  | Clothing     | Item:         |           |               |        |
|                                | Free             | Forms for Ch | nild Care Pro | viders    |               |        |

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