

**At Risk and Rilya Wilson Act Child Absence Reporting Form  
Sumter County**

Name of Facility \_\_\_\_\_ City \_\_\_\_\_

Name of Child Care Provider Reporting Absence \_\_\_\_\_ Telephone \_\_\_\_\_

Date of Report \_\_\_\_\_

Child(ren's) Name(s) \_\_\_\_\_

Child(ren's) DOB \_\_\_\_\_

Date(s) of Absences \_\_\_\_\_

Excused Absence \_\_\_\_\_ Unexcused Absence \_\_\_\_\_

**Sumter County Reporting:  
Fax (352) 330-1326  
Telephone (352) 330-5615**

*If you are receiving this report and have no knowledge of the case, please contact the child care provider (above).*