

Weekly Menu

Facility: _____ Provider: _____

Day / Date		Monday /	Tuesday /	Wednesday /	Thursday /	Friday /
Breakfast Must include: 1 Fluid Milk 1 Fruit /Vegetable 1 Bread/Grain <i>*Can serve a Meat/Alt. 3x per week</i>	Bread/Grains					
	Fruit/Vegetable					
	*Meat/Alt. – 3x WK					
	Fluid Milk					
AM Snack Must include 2 of the following components: 1 Fluid Milk 1 Meat / Alt. 1 Fruit 1 Vegetable 1 Bread / Grain	Component 1					
	Component 2					
Lunch Must include 1 serving of each of the components listed.	Meat / Alternative					
	Vegetable					
	Fruit					
	Bread / Grains					
PM Snack Must include 2 of the following components: 1 Fluid Milk 1 Meat / Alt. 1 Fruit 1 Vegetable 1 Bread / Grain	Component 1					
	Component 2					
	Meat / Alternative					
	Vegetable					
Dinner Must include: 1 serving of each of the components listed.	Fruit					
	Bread / Grains					
	Fluid Milk					
	Meat / Alternative					