## Daily Meal Production Record – Child Care (1530)

Name of Contracting Entity CE ID #					Name of Site		Site #	Date Meal was
COASTAL CHILD NUTRITION SERVICES					ABC 123 DAY CARE CENTER		1234	Served 02/21/2019
Meal Service: 🛛 Breakfast 🗌 AM Snack 🗌 Lunch 🗌 PM Snack 🗌 Supper 🗌 EV Snack 🗌 Check if AT Risk Snack or Meal								
Meal Description	Required Food Components		Μ	lenu	Food Items Used (Enter each food Quantity P item used) (measurable			
Breakfast Must serve all three components. May serve a meat/meat alternative in place of the grans 3 times a week.	Milk – Unflavored Whole – 1 yr olds		WHOLE MILK		GALLON, WHITE WHOLE MILK	40 OZS	Enrolle Childre	n
	Milk – Unflavored Low-Fat (1%) or Unflavored Fat-Free (skim) – 2 yrs and Older		1% MILK		GALLON, 1% WHITE MILK	2 GALLONS	1 Year	
	Milk – Flavored fat-free (skim) – 6 years and older (optional)						2 Year	15
	Vegetables						3 – 5 Yea	rs 25
	Fruits		APPLE SLICES		BAG OF APPLE SLICES, READY TO EAT, 2 LB BAG	10 LBS	6 – 12 Yea	ars D
	Grains Check box if this menu item is Whole Grain Rich		TOAST		WHOLE WHEAT BREAD, 24 OZ LOAF	48 OZS	13 – 18 Ye	ars D
Lunch/Supper Must serve all 5 required components	Meat and/or Meat Alternate						Program S	taff D
	Additional Components						Non-Progr Adults	<u> </u>
		tover/Recycled Food			Comments (Record any other meal moving instructions here):		ations or special	
	Date First Served Date Re-Served		Food Item		Quantity			
			N/A			N/A		
Snacks								
Must serve 2 of the 5 components	Substitutions due to Medical or Special dietary needs or disability							
o componente	Name of Child		Age		Substitution(s) Made		Item/Component Provided by Parent/Guardian – Y/N	
	Julie Brooks		1		Lactose Free Whole Milk - 4 oz		Tes Yes	🖂 No
							Yes	🗌 No
							Yes	🗌 No
							Yes	🗌 No
							Yes	🗌 No
							<b>Yes</b>	🗌 No
							<b>Yes</b>	No No