\* Breakfast Cereal Manufacturer: \_\_\_\_\_

\* Yogurt brand and flavor (if served): \_\_\_\_\_

\* Food and formula supplied by parent must be identified with "PS" next to each component that is supplied by parent

Provider Supplied - No symbol needed

## **INFANT MENU**

Child Care Development Services 123 E. Powell Blvd. Suite #300 Gresham, OR 97030 503-489-2528

"This institution is an equal opportunity provider"

	Infant's Name					Date of birth			Formula Name		
		DATE:		DAT	E:	DAT	TE:	DAT	E:	DAT	TE:
Breakfast	Protein/Inf Cereal					1					
	Fruit/Veg	•									
	Formula/Breastmilk										
AMS	Formula/Breastmilk					1					
	Fruit/Veg										
	Grain										
Lunch	Protein/Inf Cereal									1	
	Fruit/Veg	•		· · ·						<u> </u>	
	Formula/Breastmilk					$\square$				$\square$	
PMS	Formula/Breastmilk					1					
	Fruit/Veg					$\square$					
	Grain									1	
Dinner	Protein/Inf Cereal										
	Fruit/Veg									1	
	Formula/Breastmilk									1	
LNS	Formula/Breastmilk					1					
	Fruit/Veg			· ·		$\square$				$\square$	
	Grain					$\square$				$\square$	
	Age of Infant	Breakfast			Lur	ch and Dinner		Snack			
	Birth through 5 months	4-6 fl oz breastmilk or formula *6-8 fl oz breastmilk or formula; <b>and</b>			4-6 f	4-6 fl oz breastmilk or formula				oz breastmilk or formula	
	6 months through 11				*6-8	*6-8 fl oz breastmilk or formula; and				fl oz breastmilk or formula; <b>and</b>	
	months (until 1st birthday	*0-4 Tbsp infant cereal, meat, fish, poultry,			*0-4	*0-4 Tbsp infant cereal, meat, fish, poultry,				2 slice bread, or 0-2 crackers,	
	ſ	whole egg, cottage cheese, cooked dry beans and			whol	whole egg, cottage cheese, cooked dry beans and				4 Tbsp infant cereal or ready	
						split peas, or 0-2 oz cheese, or 0-8 oz yogurt, or				to eat breakfast cereal; <b>and</b>	
	ſ				a cor	a combination of the above; <b>and</b>				Tbsp vegetable or fruit or	
		*0-2 Tbsp vegetable or fruit, or a combination of both				*0-2 Tbsp vegetable or fruit, or a combination of both				a combination of both	

\*I certify that this infant is being offered the required amounts of breastmilk and/or formula, and solid foods when developmentally ready according to the Infant Meal Pattern Requirements listed above.

\*The information submitted is accurate in all respects. I understand that this is given in connection with the receipt of Federal funds and that deliberate misrepresentation may result in State or Federal prosecution.