

**GRAND RAPIDS URBAN LEAGUE, INC.**  
**CHILD & ADULT CARE FOOD PROGRAM**  
**MENU**

\* Reimbursement for meals containing only breast milk are allowable. The USDA recognizes the special contribution breast milk makes to the health, well-being, and the development of a child.  
 \*\* Grains/Breads at snacktime are optional for infants 8-11 months and must be made from whole grain or enriched meal or flour and suitable for infant to use as finger food.  
 \*\*\* Please note additional food requirements for infants 8 months through 11 months for lunch and supper.  
 \*\*\*\*For snack, serve two food items from the four basic categories, but do not serve two food items from the same category.  
 Note: The Food Program considers fruits and vegetables as the same food category.

DATE: From \_\_\_\_\_ To \_\_\_\_\_ Provider's Name: \_\_\_\_\_

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
<b>BREAKFAST</b>	fluid milk							
	fruit, vegetable or full strength juice							
	cereal, grains/breads or equivalent							
	iron-fortified infant formula or breast milk (infants: birth - 7 mo.)*							
	iron fortified infant formula OR breast milk; AND infant cereal AND fruit (infants: 8 through 11 months)							
<b>AM SNACK</b>	<b>Choose two of these four:</b>	/	/	/	/	/	/	/
	fluid milk							
	fruit, vegetable or full strength juice							
	cereal, grains/breads or equivalent							
	meat and/or alternate							
	iron-fortified infant formula or breast milk*							
formula or breast milk or full strength juice**								
<b>LUNCH</b>	fluid milk							
	meat and/or alternate							
	vegetable or fruit							
	vegetable or fruit							
	cereal, grains/breads or equivalent							
	iron-fortified infant formula or breast milk*							
	iron fortified infant formula OR breast milk; AND infant cereal or meat/alternate; AND fruit or vegetable***							
<b>PM SNACK</b>	<b>Choose two of these four:</b>	/	/	/	/	/	/	/
	fluid milk							
	fruit, vegetable or full strength juice							
	cereal, grains/breads or equivalent							
	meat and/or alternate							
	iron-fortified infant formula or breast milk*							
formula or breast milk or full strength juice**								
<b>SUPPER</b>	fluid milk							
	meat and/or alternate							
	vegetable or fruit							
	vegetable or fruit							
	cereal, grains/breads or equivalent							
	iron-fortified infant formula or breast milk*							
	iron fortified infant formula OR breast milk; AND infant cereal or meat/alternate; AND fruit or vegetable***							
<b>EVENING SNACK</b>	<b>Choose two of these four:</b>	/	/	/	/	/	/	/
	fluid milk							
	fruit, vegetable or full strength juice							
	cereal, grains/breads or equivalent							
	meat and/or alternate							
	iron-fortified infant formula or breast milk*							
formula or breast milk or full strength juice**								