

AFTER SCHOOL SNACK PROGRAM
DAILY PRODUCTION RECORD (Snacks Claimed On School Days ONLY)

Site Name: _____ Week: _____ Year: _____

MEAL PATTERN	MENU	SERV. SIZE	QUANT. PREP.	NUMBER SNACKS
MONDAY: SNACK (Select 2 of 4 food groups) Milk, Fluid (1 CUP) Juice or Fruit or Veg. (3/4 C) Grains/Breads (1 SERVING) Meat or Meat Alternate (1 OZ)				Students: Adults:
TUESDAY: SNACK (Select 2 of 4 food groups) Milk, Fluid (1 CUP) Juice or Fruit or Veg. (3/4 C) Grains/Breads (1 SERVING) Meat or Meat Alternate (1 OZ)				Students: Adults:
WEDNESDAY: SNACK (Select 2 of 4 food groups) Milk, Fluid (1 CUP) Juice or Fruit or Veg. (3/4 C) Grains/Breads (1 SERVING) Meat or Meat Alternate (1 OZ)				Students: Adults:
THURSDAY: SNACK (Select 2 of 4 food groups) Milk, Fluid (1 CUP) Juice or Fruit or Veg. (3/4 C) Grains/Breads (1 SERVING) Meat or Meat Alternate (1 OZ)				Students: Adults:
FRIDAY: SNACK (Select 2 of 4 food groups) Milk, Fluid (1 CUP) Juice or Fruit or Veg. (3/4 C) Grains/Breads (1 SERVING) Meat or Meat Alternate (1 OZ)				Students: Adults: