DAILY INFANT MEAL RECORDS:

Multiple Infants - Breakfast, AM Snack, Lunch, PM Snack

*All food components are required when infant is developmentally ready.

Month/Day/Year: Site:												_	
		BREAKFAST			AM SNACK			LUNCH			PM SNACK		
Common Abbreviations: B.M. = Breast milk F = Formula Rice = "Rice" Cereal Oat = "Oatmeal" Cereal Mixed = "Mixed" Cereal Infants fed on-site by breastfeeding mothers = B.M. by mom Last Name, First Name & Date of Birth	Meal Benefit Category	4-6 Fl. Oz (0-5 months) or 6-8 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	Infant Cereal and/or 0-4 Tbsp Meat/ meat alternate ²	Vegetable, or Fruit or a combination of both	4-6 Fl. Oz (0-5 months) 2-4 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	Infant Cereal Or Bread or 0 – ½ oz eq Crackers or Ready-to- eat Breakfast Cereal	0-2 Tbsp. Vegetable, or Fruit or a combination of both	4-6 Fl. Oz (0-5 months) or 6-8 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	Infant Cereal and/or 0-4 Tbsp Meat/ meat alternate ²	Vegetable, or Fruit or a combination of both	4-6 Fl. Oz (0-5 months) 2-4 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	O-1/2 oz eq Infant Cereal or Bread or O - 1/4 oz eq Crackers or Ready-to-eat Breakfast Cereal	Vegetable, or Fruit or a combination of both

This form must be used in combination with a point-of-service meal count sheet, i.e., the blue and white Record of Meals and Supplement Served form.

¹⁻Breastfed infants who regularly consume less than the minimum amount of breastmilk per feeding, a serving of less than the minimum amount of breastmilk may be offered, with additional breastmilk offered at a later time if the infant will consume more. ²⁻Meats include beef, pork, fish poultry, whole egg (0-4 Tbsp.). Meat alternates include cooked dry beans or dry peas (0-4 Tbsp.), cheese (0-2 ounces), cottage cheese (0-4 ounces), or Yogurt (0-4 ounces or ½ cup).

DAILY INFANT MEAL RECORDS:

Multiple Infants – Breakfast, Lunch, PM Snack

*All food components are required when infant is developmentally ready.

Month/Day/Year:		Site:								
		Е	BREAKFAST			LUNCH			PM SNACK	
Common Abbreviations: B.M. = Breast milk F = Formula Rice = "Rice" Cereal Oat = "Oatmeal" Cereal Mixed = "Mixed" Cereal Infants fed on-site by breastfeeding mothers = B.M. by mom Last Name, First Name & Date of Birth	Meal Benefit Category	4-6 Fl. Oz (0-5 months) 6-8 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	Infant Cereal &/or 0-4 Tbsp Meat/ meat alternate ²	Vegetable, or Fruit or a combination of both	(0-5 months) 6-8 Fl. Oz (6-11 months)	Infant	Vegetable, or Fruit or a combination of both	4-6 Fl. Oz (0-5 months) 2-4 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	0-1/2 oz eq Infant Cereal or Bread or 0 - 1/4 oz eq Crackers or Ready-to-eat Breakfast Cereal	0 – 2 Tbsp. Vegetable, or Fruit or a combination of both

This form must be used in combination with a point-of-service meal count sheet, i.e., the blue and white Record of Meals and Supplement Served form.

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WEEKLY MEAL RECORD

Individual Infant – Breakfast, Lunch and PM Snack

*All food components are required when infant is developmentally ready

Child's Name:	Date of Birth:
Site:	Meal Benefit Category:

Common Abbreviations:

B.M. = Breast milk

F = Formula

Rice = "Rice" Cereal

Oat = "Oatmeal" Cereal Mixed = "Mixed" Cereal

Infants fed on-site by breastfeeding

mothers = B.M. by mom

			BREAKFAST			LUNCH			PM SNACK	
Month, Day, Year		4-6 Fl. Oz (0-5 months) 6-8 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	Infant Cereal &/or 0-4 Tbsp Meat/meat alternate ²	0 – 2 Tbsp. Vegetable, or Fruit or a combination of both	4-6 Fl. Oz (0-5 months) 6-8 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	Infant Cereal &/or 0-4 Tbsp Meat/meat alternate ²	0–2 Tbsp. Vegetable, or Fruit or a combination of both	4-6 Fl. Oz (0-5 months) 2-4 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	0-1/2 oz eq Infant Cereal/ or Bread or 0 - 1/4 oz eq Crackers or Ready-to-eat Breakfast Cereal	0 – 2 Tbsp. Vegetable, or Fruit or a combination of both
	Monday									
	Tuesday									
	Wednesday									
	Thursday									
	Friday									

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This form must be used in combination with a point-of-service meal count sheet, i.e., the blue and white Record of Meals and Supplement Served form.

²-Meats include beef, pork, fish poultry, whole egg (0-4 Tbsp.). Meat alternates include cooked dry beans or dry peas (0-4 Tbsp.), cheese (0-2 ounces), cottage cheese (0-4 ounces), or Yogurt (0-4 ounces or ½ cup).

WEEKLY MEAL RECORD

Individual Infant - Breakfast, AM Snack, Lunch & PM Snack

*All food components are required when infant is developmentally ready

Child's Name:	Date Of Birth:	Mixed = ' Infants fe
Site:	Meal Benefit Category:	mothers =

Common Abbreviations:

B.M. = Breast milk

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Rice = "Rice" Cereal
Oat = "Oatmeal" Cereal

Mixed = "Mixed" Cereal

Infants fed on-site by breastfeeding

mothers = B.M. by mom

		BF	REAKFAST	Γ		AM SNACK			LUNCH		PM SNACK			
Month, Day, Year		4-6 Fl. Oz (0-5 months) 6-8 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	Infant Cereal &/or 0-4 Tbsp Meat/meat alternate ²	0 – 2 Tbsp. Vegetable, or Fruit or a combination of both	4-6 Fl. Oz (0-5 months) 2-4 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	Infant Cereal or Bread or 0 – ¼ oz eq Crackers or Ready-to- eat Breakfast Cereal	0 – 2 Tbsp. Vegetable, or Fruit or a combination of both	4-6 Fl. Oz (0-5 months) 6-8 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	Infant Cereal &/or 0-4 Tbsp Meat/meat alternate ²	0 – 2 Tbsp. Vegetable, or Fruit or a combination of both	4-6 Fl. Oz (0-5 months) 2-4 Fl. Oz (6-11 months) Breast Milk ¹ or Formula	Infant Cereal or Bread or 0-1/4 oz eq Crackers or Ready-to- eat Breakfast Cereal	0 – 2 Tbsp. Vegetable, or Fruit or a combination of both	
	Monday													
	Tuesday													
	Wednesday													
	Thursday													
	Friday													

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