

Child Care Center: _____

Child Breakfast Meal Record

Date: _____

VT Agency of Education

Date	Item & Quantity	Vegetable/Fruit		Grains <u>OR</u> Meat/Meat Alternate* (Up to 3x per week*) 1-2 & 3-5 yr. old's (1/2 oz. eq.)	Milk	
		1-2 yr. old's (1/4 cup)	3-5 yr. old's (1/2 cup)		1-2 yr. old's (4 fl. oz.)	3-5 yr. old's (6 fl. oz.)
	<i>Item</i>					
	<i>Quantity Prepared</i>					
	<i>Item</i>					
	<i>Quantity Prepared</i>					
	<i>Item</i>					
	<i>Quantity Prepared</i>					
	<i>Item</i>					
	<i>Quantity Prepared</i>					
	<i>Item</i>					
	<i>Quantity Prepared</i>					