

Adult Menu

CACFP Agreement Number



Institution Name: _____

Month and Year: _____

Food Group		Date:	Monday	Tuesday	Wednesday	Thursday	Friday
8 fl. oz. 1/2 cup 2 oz. eq. 2 oz. meat/fish or tofu; or 1 egg; or 8 oz. yogurt; or 2 oz. cheese; or 1/2 cup beans	Fluid Milk ^{1,2}	Breakfast					
	Vegetable /Fruit ³						
	Grains ⁴						
	Meat/ Meat Alternates						
8 fl. oz. 1/2 cup 1/2 cup 2 oz. eq. 2 oz. meat/fish or tofu; or 1 egg; or 8 oz. yogurt; or 2 oz. cheese; or 1/2 cup beans	Fluid Milk ^{1,2}	Lunch / Supper					
	Vegetable ³						
	Vegetable /Fruit ³						
	Grains ⁴						
	Meat/ Meat Alternates						
Choose Two Food Groups for Snack 8 fl. oz. 1/2 cup 1/2 cup 1 oz. eq. 1 oz. meat/fish or tofu; or 1/2 egg; or 4 oz. yogurt; or 1 oz. cheese; or 1/4 cup beans	Fluid Milk ^{1,2}	Snack					
	Vegetable ³						
	Fruit ³						
	Grains ⁴						
	Meat/ Meat Alternates						
		a.m.					
		p.m.					

¹**Fluid Milk:** Unflavored or flavored fat-free (skim) or low-fat (1%) is served at breakfast and lunch. **Non-dairy beverages** may be served with appropriate documentation. Milk is optional for suppers served to adult participants. ²6 oz of **Yogurt** may be substituted for 8 oz fluid milk once per day when yogurt is not served as a meat alternate in the same meal. ³**Juice**, if served, is pasteurized full-strength (100%) juice. ⁴**WG, WW, and WGR** indicate whole grain-rich foods.