

Kent Regional 4C Child and Adult Care Food Program

233 E. Fulton Street, Suite 107
Grand Rapids, Michigan 49503-3262
616-451-8281 or 1-800-448-6995
www.4Cchildcare.org

IF CORRECT

- ALL MIXED DISHES ARE HOMEMADE
- ALL 3b ITEMS ARE SERVED ON THE SIDE
- ALL JUICE SERVED IS 100%
- CLAIMING INFANT(S) UNDER ONE YEAR
- ALL INFANT FORMULA & CEREAL IS IRON FORTIFIED. TYPES OF INFANT CEREAL SERVED _____

Menus must be in our office on or before the 5th of each month.

I certify that the information submitted is accurate in all respects; that it is given in connection with the receipt of federal funds and that deliberate misrepresentation may result in state or federal prosecution.

PROVIDER SIGNATURE

Claim Month: _____ Year: _____

PRINT NAME

ADDRESS

CITY & ZIP

CHILD CARE LICENSE NUMBER

() _____
TELEPHONE NUMBER

ASSISTANT CAREGIVER'S SIGNATURE

FOR OFFICE USE ONLY		
# of Kids Claimed	_____	
# of Days Claimed	_____	
	Tier 1	Tier 2
Breakfast	_____	_____
Lunch	_____	_____
Supper	_____	_____
Snacks	_____	_____
Code(s)	_____	
Initials	<input checked="" type="checkbox"/> _____	<input checked="" type="checkbox"/> _____

Requirements for children one year and older

BREAKFAST - ALL ITEMS

- Juice or Fruit or Vegetable
- Cereal or Bread or Pasta or Rice (enriched or whole grain)
- Fluid Milk

LUNCH/SUPPER - ALL ITEMS

- Protein: Meat or Poultry or Fish or Egg or Peanut Butter or Cheese or Yogurt
- Cereal or Bread or Pasta or Rice (enriched or whole grain)
- (a) and (b) Vegetables and/or Fruits: 2 Fruits or 2 Vegetables or 1 Fruit and 1 Vegetable
- Fluid Milk

PRE-PRINTED MENU #7

NOTES:

SNACKS - INCLUDE 2 OF THESE 4 FOOD GROUPS

- Fluid Milk*
- Juice* or Vegetable or Fruit
- Bread or Cereal or Pasta or Rice (enriched or whole grain)
- Protein (See Lunch and Supper)

* Juice may not be served if milk is the only other food.

TIME SERVED

DAY	DATE	BREAKFAST	A.M. SNACK	LUNCH	AFTERNOON SNACK	SUPPER	EVENING SNACK
		1. Pears 2. Poptarts 3. Milk	1. Cottage Cheese 2. Peaches	1. Turkey & Cheese 2. Crackers 3. a. Apples b. Carrot Sticks 4. Milk	*Safari Chex 1. Chex Cereal Animal Crackers 2. Milk	1. Hamburgers 2. Buns 3. a. French Fries b. Tomatoes 4. Milk	1. Cereal Bars 2. Milk
		1. Juice 2. Cereal 3. Milk	1. Blueberries 2. Milk	1. Pep. & Cheese 2. Bagels 3. a. Tomato Sauce b. Fruit Cocktail 4. Milk	1. Granola Bars 2. Milk	1. Meat & Cheese 2. Sub Buns 3. a. Peaches b. Celery 4. Milk	1. Muffins 2. Milk
		1. Juice 2. Toast 3. Milk	1. Cereal 2. Milk	1. *Ham & Ch. Logs 2. Pretzels 3. a. Pineapple b. Melon (side) 4. Milk	1. Bagels 2. Milk	1. Hotdogs 2. Buns 3. a. Baked Beans b. Melon 4. Milk	1. Pretzels 2. Milk
		1. Blueberries 2. Pancakes 3. Milk	1. Yogurt 2. Strawberries (side)	1. Yogurt 2. PBJ Sandwich 3. a. Strawberries b. Bananas 4. Milk	1. Cookies 2. Milk	1. Ground Beef 2. Spaghetti 3. a. Tomato Sauce b. Lettuce Salad 4. Milk	1. Cheese 2. Crackers
		1. Applesauce 2. Bagels 3. Milk	1. Pretzels 2. Juice	1. Eggs 2. Toast 3. a. Hashbrowns b. Peaches 4. Milk	*Sunshine Pops 1. Bananas Orange Juice 2. Crackers	1. BBQ Beef 2. Buns 3. a. Potato Salad b. Raspberries 4. Milk	1. Poptarts 2. Milk
		1. Juice 2. Donuts 3. Milk	1. Peanut Butter 2. Toast	1. Ham & Cheese 2. Tortilla Wraps 3. a. Blueberries b. Bananas 4. Milk	1. Graham Crackers 2. Milk	1. Pep. & Cheese 2. Bagels 3. a. Tomato Sauce b. Grapes 4. Milk	1. Soft Pretzels 2. Milk
		1. Juice 2. Cereal 3. Milk	1. Granola Bars 2. Milk	1. Hotdogs 2. Buns 3. a. Baked Beans b. Melon 4. Milk	1. Pretzels 2. Milk	1. Chicken Nuggets 2. Bread 3. a. Blueberries b. Pears 4. Milk	1. Yogurt (side) 2. Strawberries

Please list children in same order on all pages										FOR OFFICE USE ONLY		
CHILD'S FIRST/LAST NAME										Tier 1	Tier 2	
										B _____	B _____	
									L _____	L _____		
									SU _____	SU _____		
									SN _____	SN _____		
Breakfast												
Lunch												
Supper												
AM												
Afternoon												
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Afternoon												
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*Denotes that optional recipes are available at www.4cchildcare.org

REMINDER: Parent note must be submitted if claiming a holiday.

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