

# Child and Adult Care Food Program

## WEEKLY MENU PLANNER

Sponsor: \_\_\_\_\_

Week of : \_\_\_\_\_

Meal Component		Monday	Tuesday	Wednesday	Thursday	Friday
<b>Breakfast</b>	Milk					
	Juice, Fruit, or Vegetable					
	Bread/Bread Equivalent					
<b>A.M. Snack</b>	(Select Two)					
	Milk					
	Juice*, Fruit, or Vegetable					
	Bread/Bread Equivalent					
	Meat/Meat Alternate					
<b>Lunch</b>	Milk					
	Fruit or Vegetable (Two)					
	Bread/Bread Equivalent					
	Meat/Meat Alternate					
<b>P.M. Snack</b>	(Select Two)					
	Milk					
	Juice*, Fruit, or Vegetable					
	Bread/Bread Equivalent					
	Meat/Meat Alternate					
<b>Supper</b>	Milk					
	Fruit or Vegetable (Two)					
	Bread/Bread Equivalent					
	Meat/Meat Alternate					

**\* Juice cannot be served when milk is the only other component.**