

CACFP Infant Menu & Production Record - 0 through 5 Months



Child and Adult Care Food Program

Child's Name:		Breast Milk or Formula (indicate type):		
Age:	DOB:	Parent Provides Formula YES__ NO__		

List the amount of IFIF* or Breast Milk offered to the infant at each meal or snack. (Do not list the amount consumed by the infant).
 If the infant is breastfed onsite, a volume does not need to be recorded, simply write - BF or nursed; or documentation determined by the institution.

Week of: _____		Serving	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast	IFIF* or Breast Milk**	4-6 fl oz					
Lunch	IFIF* or Breast Milk**	4-6 fl oz					
Snack -PM	IFIF* or Breast Milk**	4-6 fl oz					

Week of: _____		Serving	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast	IFIF* or Breast Milk**	4-6 fl oz					
Lunch	IFIF* or Breast Milk**	4-6 fl oz					
Snack - PM	IFIF* or Breast Milk**	4-6 fl oz					

Week of: _____		Serving	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast	IFIF* or Breast Milk**	4-6 fl oz					
Lunch	IFIF* or Breast Milk**	4-6 fl oz					
Snack - PM	IFIF* or Breast Milk**	4-6 fl oz					

Week of: _____		Serving	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast	IFIF* or Breast Milk**	4-6 fl oz					
Lunch	IFIF* or Breast Milk**	4-6 fl oz					
Snack - PM	IFIF* or Breast Milk**	4-6 fl oz					

Week of: _____		Serving	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast	IFIF* or Breast Milk**	4-6 fl oz					
Lunch	IFIF* or Breast Milk**	4-6 fl oz					
Snack - PM	IFIF* or Breast Milk**	4-6 fl oz					

I verify that: I have served Mother's Milk or Iron-Fortified Infant Formula (IFIF), all infants have an infant feeding form on file, infants were offered the required foods listed for their age group, as developmentally appropriate, and all information on this form is correct.

*IFIF = Iron-Fortified Infant Formula
 **A serving less than the minimum amount of Breast Milk may be offered, with additional Breast Milk offered if the infant is still hungry.

This menu and production record covers the month of: _____ Completed by _____

This institution is an equal opportunity provider.