

**Two Week Menu**      Month \_\_\_\_\_ Week of \_\_\_\_\_ Provider \_\_\_\_\_

Council of Churches-Child Care Food Program

<b>Breakfast</b>	<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>	<b>THURSDAY</b>	<b>FRIDAY</b>
Milk					
Fruit/Vegetable					
Grain/bread					
<b>Lunch</b>					
Milk					
Meat/Meat Alternate					
Fruit/Vegetable					
Fruit/Vegetable					
Grain/Bread					
Other					
<b>PM Snack</b> Choose 2 different components					
Milk or Fruit/Vegetable or Meat or Grain					

**Week of** \_\_\_\_\_

<b>Breakfast</b>	<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>	<b>THURSDAY</b>	<b>FRIDAY</b>
Milk					
Fruit/Vegetable					
Grain/bread					
<b>Lunch</b>					
Milk					
Meat/Meat Alternate					
Fruit/Vegetable					
Fruit/Vegetable					
Grain/Bread					
Other					
<b>PM Snack</b> Choose 2 different components					
Milk or Fruit/Vegetable or Meat or Grain					