

Provider Name \_\_\_\_\_

Month \_\_\_\_\_ Year \_\_\_\_\_

At least one serving of grain per day must be whole-grain rich.

Day	Breakfast	AM Snack	Lunch		PM Snack	Supper	
	Milk	1.	Meat or other Approved Protein		1.	Meat or other Approved Protein	
	Vegetable, fruit or both	2.	Milk	Whole Grain (WG) (recommended)	2.	Milk	Whole Grain (WG) (recommended)
	Whole Grain (WG) (recommended)	(Serve 2 out of 5 Components)	Vegetable	Vegetable or Fruit	(Serve 2 out of 5 Components)	Vegetable	Vegetable or Fruit
	Milk						
			Milk			Milk	
	Milk						
			Milk			Milk	
	Milk						
			Milk			Milk	
	Milk						
			Milk			Milk	
	Milk						
			Milk			Milk	
	Milk						
			Milk			Milk	