# CACFP Food Production Record

| **2. Name of Child Care Business, City, State:**  |
| --- |
| **3. Name of the Person Responsible:**  |

| **Meal** | **5. Menu** | **6. Foods Used** | **7. Purchase Unit** | **8. Serving Size** | **9. # of Servings to Prepare** | **10. Amount of Food to Prepare** |
| --- | --- | --- | --- | --- | --- | --- |
| **PM Snack****4.Date:**       Time:       Must include:2 foods from the4 food groups |       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
| **PM Snack****4.Date:**       Time:       Must include:2 foods from the4 food groups |       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
| **PM Snack****4.Date:**       Time:       Must include:2 foods from the4 food groups |       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
| **PM Snack****4.Date:**       Time:       Must include:2 foods from the4 food groups |       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |