

### ADULT DAY CARE CENTERS DAILY MENU RECORD

Name of Day Care Center	Program No. <b>TX</b>	Date
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1. MEAL TYPE	2. MENU	3. FOOD ITEMS USED	4. AMOUNT PREPARED	5. LEFTOVERS *	6. NUMBER SERVED		
					Enrolled Adults	Program Adults	Non-prog. Adults
<b>BREAKFAST</b> 1. Fluid Milk 2. Fruit or Juice 3. Whole Grain or Enriched Bread or Bread Alternate (2 servings required)					Number of Complete Seconds		
<b>AM SNACK (choose 2)</b> 1. Fluid Milk 2. Vegetable(s) and/or Fruits 3. Whole Grain or Enriched Bread or Bread Alternate 4. Meat or Meat Alternate					Number of Complete Seconds		
<b>LUNCH</b> 1. Fluid Milk 2. Meat or Meat Alternate 3. Vegetable(s) and/or Fruits (two or more) 4. Whole Grain or Enriched Bread or Bread Alternate (two servings required) 5. Other Foods					Number of Complete Seconds		

\* Only programs using Offer vs. Serve may use leftovers.

**ADULT DAY CARE CENTERS  
DAILY MENU RECORD (continued)**

1. MEAL TYPE	2. MENU	3. FOOD ITEMS USED	4. AMOUNT PREPARED	5. LEFTOVERS *	6. NUMBER SERVED		
					Enrolled Adults	Program Adults	Non-prog. Adults
<b>PM SNACK (choose 2)</b> 1. Fluid Milk 2. Vegetable(s) and/or Fruits 3. Whole Grain or Enriched Bread or Bread Alternate 4. Meat or Meat Alternate							
					Number of Complete Seconds		
<b>SUPPER</b> 1. Meat or Meat Alternate 2. Vegetable(s) and/or Fruits (two or more) 3. Whole Grain or Enriched Bread or Bread Alternate (two servings required) 4. Other Foods							
					Number of Complete Seconds		
<b>EVENING SNACK (choose 2)</b> 1. Fluid Milk 2. Vegetable(s) and/or Fruits 3. Whole Grain or Enriched Bread or Bread Alternate 4. Meat or Meat Alternate							
					Number of Complete Seconds		

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