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| --- | --- | --- | --- | --- |
| **Meal Service** | **Serving Size per Age Group** | **Components Used** | **Amounts Used** | **Number Served by Age Group** |
| **Snack (Supplements):** | **Birth – 5 months** | **6 – 11 months** |  |  |  |
| Breast milk (BM) or Iron-Fortified Infant Formula (IFIF)(1)(2)(7) | 4 – 6 fluid ounces | 2 - 4 fluid ounces | 1. | 1. |  Birth-5 Mo.\_\_\_\_\_\_\_\_\_6 – 11 Mo. \_\_\_\_\_\_\_\_\_  |
| Infant Cereal or Meat/Meat Alternate(3)(4) | None | see options below(6) (7)(8) | 2. | 2. |
| Vegetable or Fruit or combination of both (8)(9) | None | 0 – 2 tablespoons | 3. | 3. |
| **Lunch or Supper:** |  |  |  |  |  |
| Breast milk (BM) or Iron-Fortified Infant Formula (IFIF) (1)(2)(7) | 4 – 6 fluid ounces | 6 – 8 fluid ounces | 1. | 1. | Birth-5 Mo.\_\_\_\_\_\_\_\_\_6 – 11 Mo. \_\_\_\_\_\_\_\_\_  |
| Infant Cereal or Meat/Meat Alternate (3)(4) | None | see options below**\*\*\*** | 2. | 2. |
| Vegetable or Fruit or combination of both(8)(9) | None | 0 – 2 tablespoons | 3. | 3. |
| **Snack (Supplements):** |  |  |  |  |  |
| Breast milk (BM) or Iron-Fortified Infant Formula (IFIF) (1)(2)(7) | 4 – 6 fluid ounces | 2 – 4 fluid ounces | 1. | 1. | Birth-5 Mo.\_\_\_\_\_\_\_\_\_6 – 11 Mo. \_\_\_\_\_\_\_\_\_  |
| Infant Cereal or Grains/Breads Product(3)(4)(6)(7)(10) | None | see options below(6)(7)(10) | 2. | 2. |
| Vegetable or Fruit or combination of both(8)(9) | None | 0 – 2 tablespoons | 3. | 3. |

**Infant Daily Production Record - Meal Documentation**

 Facility Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(1). Breastmilk (BM) or Iron-Fortified Infant (IFIF), or portions of both must be served; however, it is recommended that BM be served in place of formula from birth through 11 months. For some breastfed infants who regularly consume less that the minimum amount of BM per feeding, a serving of less than that minimum amount of BM may be offered, with additional BM offered at a later time if the infant will consume more.

(2). Mother’s wishing to breastfeed their infants on-site at the facility may do so and the meals are fully reimbursable. Infants cannot be taken off-site and have the meals claimed.

(3). Beginning **October 1, 2019**, ounce equivalents are to determine the quantity of creditable grains.

**\*\*\*Eligible meat/meat alternates for infants are as follows:**

0-4 tablespoons:

 Infant cereal

 Meat, fish, poultry

 Whole egg

 Cooked, dry beans or peas

0-2 ounces cheese

0-4ounces cottage cheese

0-8 ounces yogurt

Or a combination of the above

(4). Yogurt must contain no more than 23 grams of total sugars per 6 ounces.

(5). A serving of grains must be whole-grain rich, enriched meal, or enriched flour.

(6). Breakfast cereals must contain no more than 6 grams of sugars per dry ounce.

(7). Infant formula and dry infant cereal must be iron-fortified.

(8). A serving of this component is required when the infant is developmentally ready to accept it.

(9). Fruit and vegetable juices must not be served to infants.

(10). Grains/breads options for infants ages 6 - 11 months:

 0-1/2 slice bread or 0-4 tablespoons infant cereal

 0-2 crackers or 0-4 tablespoons ready-to-eat breakfast cereal