

OCTOBER 2022 INFANT LUNCH STAGE I

Child's name _____

Signature _____

Mon	Tue	Wed	Thu	Fri
3 CARROTS BANANAS BREAST MILK/FORMULA	4 CARROTS BANANAS BREAST MILK/FORMULA	5 PEAS APPLESAUCE BREAST MILK/FORMULA	6 BEANS PRUNES BREAST MILK/FORMULA	7 BEANS PRUNES BREAST MILK/FORMULA
10 PEAS APPLESAUCE BREAST MILK/FORMULA	11 PEAS APPLESAUCE BREAST MILK/FORMULA	12 CARROTS BANANAS BREAST MILK/FORMULA	13 SWEET POTATO PEACHES BREAST MILK/FORMULA	14 SWEET POTATO PEACHES BREAST MILK/FORMULA
17 BEANS PEARS BREAST MILK/FORMULA	18 BEANS PEARS BREAST MILK/FORMULA	19 SQUASH PRUNES BREAST MILK/FORMULA	20 CARROTS BANANAS BREAST MILK/FORMULA	21 CARROTS BANANAS BREAST MILK/FORMULA
24 SWEET POTATO PEACHES BREAST MILK/FORMULA	25 SWEET POTATO PEACHES BREAST MILK/FORMULA	26 PEAS APPLESAUCE BREAST MILK/FORMULA	27 SQUASH PRUNES BREAST MILK/FORMULA	28 SQUASH PRUNES BREAST MILK/FORMULA
31 PEAS PEARS BREAST MILK/FORMULA				

USDA IS AN EQUAL OPPORTUNITY PROVIDER AND EMPLOYER

MENUS ARE SUBJECT TO CHANGE WITHOUT NOTICE

_____ My Child can have the following food items that I have marked.

_____ My Child is not eating baby food only bottles.