



Office of the  
State Superintendent of Education

**SAMPLE MENU PLAN**

Name of Facility:

Menu for the Week of:

<b>Meal Pattern</b>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>BREAKFAST</b>					
Milk					
Fruit, Vegetable, or Juice					
Other (optional)					
<b>LUNCH</b>					
Milk					
Meat or Meat Alternate					
Vegetable or Fruit					
Vegetable or Fruit					
Bread or Bread Alternate					
Other (Optional)					
<b>SNACK</b> (Choose 2)					
Milk					
Fruit, Vegetable or Juice					
Meat or Meat Alternate					
Bread or Bread Alternate					