# Lunch Form for SMI Records

Date: _____
Menu: _____
_____
_____
_____
_____

School Selected:_____
Number Planned:
Elementary _____
Middle or Junior High_____
High School_____
Adult_____

**Main Entrée**_____
Convenience Item? Circle answer: **Yes** **No**

If **yes**, list brand, and product code number and portion size below. Include nutrition information from label or manufacturer. If product has a CN label, include label with nutrient information.
If **no**, attach copy of recipe.

| Brand | Product Code Number | Portion size* |
|---|---|---|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

*Indicate the number of pieces, ounces or grams per serving

**Fruit/Vegetable/Side Dish**
Name: _____
(List all ingredients in recipe or include a copy)
Fresh____Frozen____Canned_____
Own juice___Light syrup___Heavy syrup___

| Ingredient | Amount Used |
|---|---|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Portion size_____ Yield_____

**Fruit/Vegetable/Side Dish**
Name: _____
(List all ingredients in recipe or include a copy)
Fresh____Frozen____Canned_____
Own juice___Light syrup___Heavy syrup___

| Ingredient | Amount Used |
|---|---|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Portion size_____ Yield_____

**Fruit/Vegetable/Side Dish**
Name: _____
(List all ingredients in recipe or include a copy)
Fresh____Frozen____Canned_____
Own juice___Light syrup___Heavy syrup___

| Ingredient | Amount Used |
|---|---|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Portion size_____ Yield_____

**Fruit/Vegetable Purchased**
Name: _____
Obtain nutrient information and weight or volume of one serving (1/2 cup, 3 oz)

| Brand | Item Number |
|---|---|
| _____ | _____ |

Portion Size _____

| Brand | Item Number |
|---|---|
| _____ | _____ |

Portion size_____

**Grain/Bread**

Name: _____
(List all ingredients in recipe or include a copy)

| Ingredient | Amount Used |
|---|---|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Portion size_____ Yield _____

**Bread Product/Purchased**

Name: _____
Obtain nutrient information and weight of one serving (slice, bun, roll, etc).

| Brand | Item Number |
|---|---|
| _____ | _____ |

Portion size _____

| Ingredient (sandwich, etc.) | Amount Used |
|---|---|
| _____ | _____ |
| _____ | _____ |

Portion size _____Yield_____

**Dessert/Prepared**

Name: _____
(List all ingredients in recipe or include a copy)

| Ingredient | Amount Used |
|---|---|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Portion size_____ Yield_____

**Dessert/Purchased**

Name: _____
Obtain nutrient information and weight or volume of one serving (1/2 cup ice cream, 1 oz cookie).

| Brand | Item Number |
|---|---|
| _____ | _____ |

Portion size _____

| Brand | Item Number |
|---|---|
| _____ | _____ |

Portion size _____

**Other foods** (Examples: cheese sauce, catsup, mustard, gravy, salad dressing, jelly, salsa)

| Item | Portion size | Amount Used |
|---|---|---|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

**Milk**
Number of half pints served of each type or %)

Skim _____ Chocolate Skim _____
1% _____ Chocolate 1%_____
2% _____ Chocolate 2%_____
Whole _____
If using percentages, what percent of children do not take milk? _____
If same type of milk is offered everyday, this section only needs to be filled out one time.